



*The Health
& Health Services of
the City of Cambridge
in
1971*

BEING THE ANNUAL REPORT OF
THE MEDICAL OFFICER OF HEALTH

*including the School Health Service
and the report of the
Chief Public Health Inspector*

MEDICAL OFFICERS OF HEALTH OF CAMBRIDGE

1875–1906	Bushell Anningson
1906–1908	Duncan Forbes
1908	F. E. Apthorpe Webb (<i>acting</i>)
1908–1937	Andrew J. Laird
1937–1944	Arthur J. Smyth
1944–1946	Margaret C. K. Patterson (<i>acting</i>)
1946–1947	William Hartston
1947–1948	J. F. Caithness (<i>acting</i>)
1948–1972	Cyril G. Eastwood

CHIEF PUBLIC HEALTH INSPECTORS OF CAMBRIDGE

1875–1879	Henry Phillips
1879–1891	Thomas Crowhill
1892–1913	William T. Taylor
1913–1925	Leslie H. Dibblin
1925–1947	Charles White
1947–1957	Daniel W. Bottom
1957–	James F. Edwards

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DEPARTMENT OF PUBLIC HEALTH AND WELFARE
KETT HOUSE

STATION ROAD

CAMBRIDGE CB1 2JX

Telephone Cambridge 58977

January 1972

To the Mayor, Aldermen and Councillors of the City of Cambridge

MADAM MAYOR, LADIES AND GENTLEMEN,

This is my twenty-fourth (and last) Annual Report as Medical Officer of Health of Cambridge. Not only is my retirement imminent but the public health service itself is about to undergo transformation so that this appears to be an appropriate time to look both to the past and to the future.

The first Public Health Act was passed in 1848. It brought into being a new department of the government—The General Board of Health—which, many years later, was to become the Ministry of Health and, more recently, The Department of Health and Social Security. The institution of the new board posed a nice political problem for our ancestors—who was to be in charge of it? Health matters were thought to be beneath the dignity of ministers of the crown, but our forefathers, with that political acumen for which our race is so justly famed, got over the difficulty by appointing, as President of the Board, “the First Commissioner for the Time being of Her Majesty’s Woods and Forests, Land Revenues, Works and Buildings.”

The Act of 1848 also established the post of Medical Officer of Health. The curious title arose because it was originally envisaged that there might be other officers of health who were not medically qualified though, as it turned out, the Act provided only for the appointment of medical men. These appointments were permissive, not mandatory and, although many places appointed Medical Officers of Health immediately, Cambridge did not do so until it became a legal obligation in 1875.

Public health implies a concern with matters which may affect the health of the community in general (clean air, pure water, wholesome food, adequate housing and the like) rather than a concern with individuals. In the early years of this century, however, successive governments sought to make increasing provision for the welfare of special groups of the population (mothers and babies, school children, the blind and physically handicapped, to name a few) and, since there was no organised health service other than the public health service, this personal medical and welfare work was placed very largely in the hands of public health departments. The curious mixture of public and personal health was, in my view, a mistake: a mistake which is now on its way to being rectified.

In 1948, a century after the first Public Health Act, the National Health Service Act came into force. It distinguished between two kinds of health authority: those concerned with public health in the proper sense of the term (known as local sanitary authorities such as Cambridge City Council)

and those concerned with the personal health and welfare services (known as local health authorities such as Cambridge County Council). The Act had the effect of removing from non-county boroughs, like Cambridge, medical and welfare services which they had built up over the years and had administered successfully. In the case of small non-county boroughs it may have been a sensible move to put these services under the larger County Council but in the case of Cambridge (which, at that time, had a greater population than the old Cambridge County and a bigger Public Health Department) it was very much like asking the tail to wag the dog. A similar situation arose in other parts of the country and a typical British compromise was reached in 1960 when places such as Cambridge had delegated to them those of the County Council's medical and welfare services which they had previously administered and others which they had never administered in the past.

Prior to the National Health Service Act the Public Health Departments of local sanitary authorities had their own isolation hospitals for the treatment of cases of infectious disease and the Medical Officer of Health was, normally, medical superintendent of the isolation hospital, attending there daily and treating the patients. He was, therefore, the most experienced doctor in his area in the matter of infectious disease and was consulted about cases by general medical practitioners. Because of these consultations and because of his hospital connection he was fully informed about infectious diseases and in a position to do something to limit their spread. The National Health Service Act of 1948 took these hospitals from local sanitary authorities and placed them under the newly created hospital authorities. As a result Medical Officers of Health, whose primary and basic duty is to hold infectious disease at bay in their communities, have become increasingly out of touch with what is going on and with modern methods of treatment. In engineering this Act the politicians greatly diminished the protection against infection which the community previously enjoyed.

Last year saw the passing into law of the Local Authority Social Services Act, which removed most of the welfare work of Public Health Departments from their hands and places it under newly created Social Services Departments of Counties and County Boroughs. This is a move to disentangle public health and personal health services which is excellent in intention. I think that the division has not always been made in the right places and it may turn out that some other services should have been removed from the sphere of Health departments and others, which have been removed, should have been retained.

Apart from legislation there has been much political debate recently about the future of local government in general and the health services in particular. Reading various government publications upon the matter makes me wonder if the politicians realise all the implications of their meddling with matters which, it is clear, they understand imperfectly. The prevailing thought favours the abolition of Medical Officers of Health and Public Health Departments as we know them today, some of their functions being transferred to a new organisation which will be concerned with many matters at present outside the sphere of public health. Little thought seems to have been given to the containment of infectious disease because,

as we do not have nation-wide epidemics nowadays, these menaces are thought to be things of the past. They are things of the past only because Medical Officers of Health and their departments, all over the country, are taking action about infectious disease in the community day by day and hour by hour and the price of our freedom from plague and pestilence is eternal vigilance. In my own department about eight man-hours a day are given to dealing with infectious disease within the community and, at certain times of the year, the work expands far beyond this.

We British are very apt to think that our institutions are the best in the world and that we are the envy of other nations. In this we are, generally, mistaken. In the field of public health organisation and administration, however, I think our service is unsurpassed anywhere and only equalled in a few places because only we (and some Commonwealth countries modelled upon our practice) have Medical Officers of Health and Public Health Inspectors. Elsewhere the functions these officers discharge are either not carried out at all or are spread amongst a number of different people such as the police, veterinary officers and many others.

It is not widely recognised, even within the medical profession, that a Medical Officer of Health is not just a doctor holding a public appointment. A medical qualification is essential but it is only the entrance examination to public health. The medical man or woman (after qualifying and obtaining some experience of the practice of medicine) who decides to go into the public health service has to take a special course of training to obtain a qualification prescribed by law. This training embraces such things as law, public administration, business methods, civil engineering and a number of other things quite unrelated to the ordinary practice of medicine. The British public health officer is, therefore, uniquely qualified to look after public health in all its aspects, both medical and environmental. The Public Health Inspector does not require to have a medical qualification but he undergoes many years of training in environmental hygiene, studying such things as bacteriology, building construction, sanitary engineering, law, the processes and hygiene of the food trade and other matters affecting the environment of man. It is the combination of these two types of officer which, in the past, has made the British public health service so successful and, if this arrangement is to be abolished, I think that comparatively soon afterwards it will have to be painfully re-invented and brought into being again because the facts of maintaining adequate public health services demand some arrangement of this kind despite the fancies of would-be reformers.

The Department of Public Health of this City came into being in 1875 with the appointment of the first Medical Officer of Health and greatly expanded as more duties were laid upon it. When I came to Cambridge the staff of the department was fewer than 100 and the headquarters were in the Guildhall. A constant flow of legislation so increased our duties that additional staff was required and the delegation of County functions brought about a considerable increase until, at the peak, the staff numbered not far short of 300 and the Guildhall accommodation was quite inadequate to contain those who had to work at the central office. Accordingly, in 1963, the department was moved to Kett House where, for a time, we enjoyed spacious conditions and were able to bring under one roof people

who had, hitherto, worked in many parts of the city. As in all other aspects of local government the volume of work continued to increase and the offices at Kett House are no longer spacious but barely sufficient for our needs.

I have been engaged in medical work in one way or another for over 40 years: 36 of these years being in the public health service. I have been a Medical Officer of Health for 30 years: over 23 of them in Cambridge. Looking back on my professional life my main feeling is one of dissatisfaction. There has never been enough time to do properly all the things that I would like to have done. There has never been enough time to keep up to date with reading or to sit down and think and, until four years ago, there has never been an adequate number of senior staff who could be given a wide field of responsibilities themselves. According to a calculation made by one of the United Nations agencies, reports on medicine, biology and other subjects on which I ought to be well-informed, appear in journals over the world once in every five minutes throughout the twenty-four hours. It is difficult to keep abreast of an advancing tide of knowledge of these dimensions. Moreover, new laws (taking Acts of Parliament and Statutory Instruments together) number about 2,500 a year. Not all of them concern a Medical Officer of Health but many do. It seems to me that there is something basically wrong with an organisation that has to alter its rules 2,500 times a year.

On 1 April 1971 some of our functions were transferred to the County Council's Social Services Department. These were the Home Help Service, Welfare of the Blind and Disabled, The Mental Health Service, Seymour House Geriatric Day Centre, Sedley Nursery and the registration and supervision of private nurseries. Because of this some parts of this Report only show figures for the first quarter of the year.

This year saw improved liaison with Addenbrooke's Hospital in the training of nurses and an arrangement with the Maternity Hospital whereby each domiciliary midwife takes one 'booked early discharge' patient into the hospital and delivers her in the normal labour ward, working in fact as hospital staff. The patient is then transferred home, after forty-eight hours, to the care of the midwife she knows.

Our four main clinics (Auckland Road, Coleridge, Kingsway and Cherryhinton) are Health Centres within the meaning of The National Health Service Act 1948, S.21(I) (d) but I have been trying, since 1964, to establish Health Centres in which general medical practitioners and dentists might also work. I have encountered innumerable delays and frustrations but, in 1971, final agreement was reached about a site at Seymour Street (on land at present belonging to Brookfields Hospital) and planning the first Health Centre began. At the same time, the City Planning Department surveyed the City and made it possible to ear-mark sites for several further health centres.

Another important development during the year was the purchase of two portable buildings for installation at private houses so that people needing dialysis by an 'artificial kidney' may have this at home, in suitable instances, thus relieving pressure upon hospital beds. The buildings (known as 'Portakabins') can be moved to other sites as required.

I cannot close this introductory letter without referring to many who have helped and supported me during my time in Cambridge. I have had a truly excellent staff and have been particularly fortunate in my immediate assistants. I have been fortunate, too, in my committees and their chairmen and the chief officers of the Council. My first impression of civic life in Cambridge was that I had fallen among agreeable people and this opinion has been strengthened over the years.

The delegation of County Council functions has caused much friction in many parts of the country. In Cambridge, however, it has worked very smoothly. This has been due to the cordial relations which have existed between Dr Tyser, the County Medical Officer, and myself and I would like to record my thanks to him also.

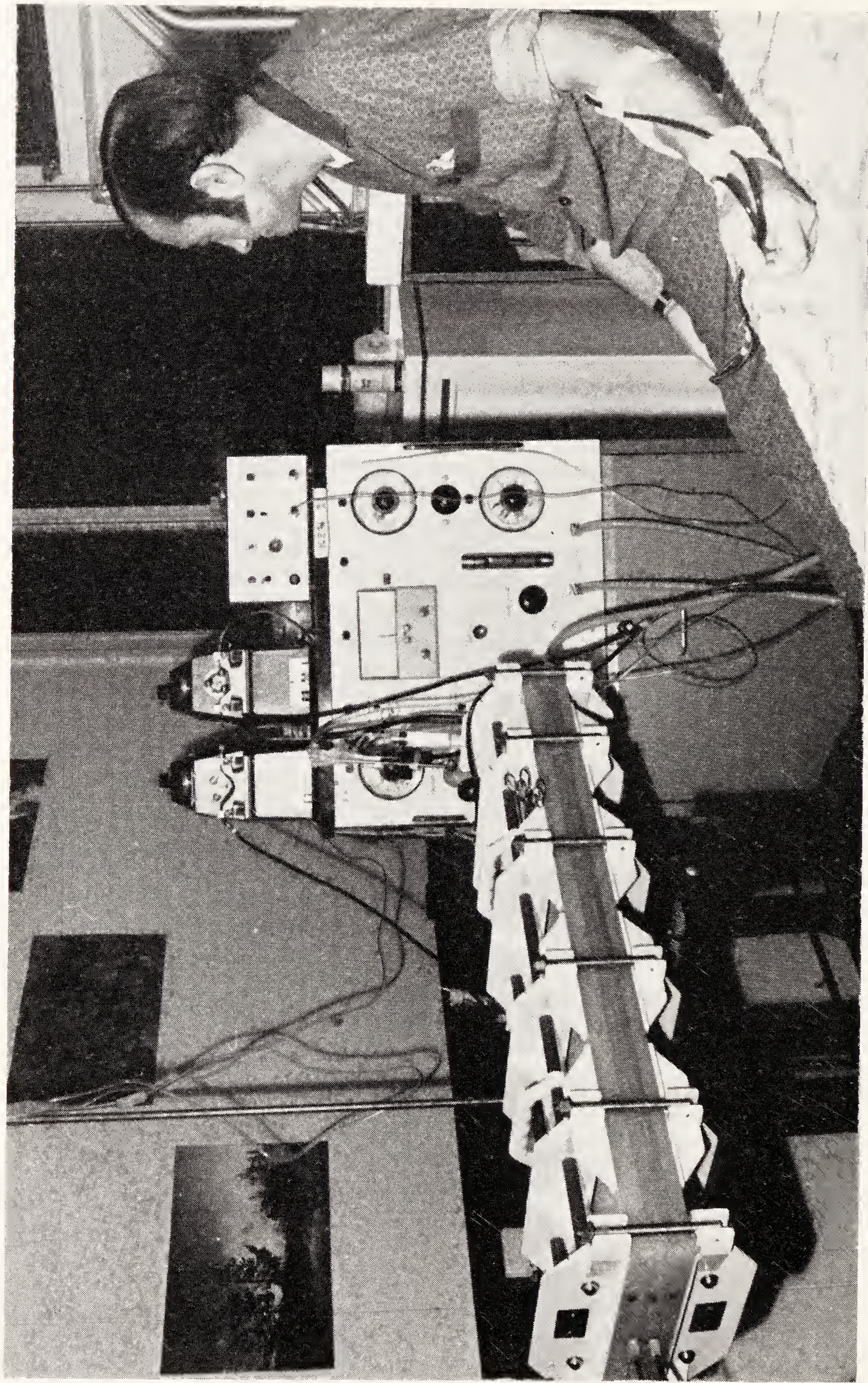
I have the honour to be,

Madam Mayor, Ladies and Gentlemen,

Your obedient servant,

CYRIL G. EASTWOOD,

*Medical Officer of Health and
Principal School Medical Officer*



Renal dialysis in a 'Portakabin'

Part I

ORGANIZATION
AND ADMINISTRATION

SECTION 1. THE COMMITTEES MOST CONCERNED WITH THE WORK OF THE DEPARTMENT

PUBLIC HEALTH AND WELFARE COMMITTEE (1971-72)

Chairman ALDERMAN RIDGEON

ALDERMAN MRS BURN
COUNCILLOR GARNER
(*Vice-Chairman*)
COUNCILLOR LEACH

COUNCILLOR MRS LIPSTEIN
COUNCILLOR MURRAY
COUNCILLOR WOODS

COMMITTEE FOR EDUCATION (1971-72)

Chairman ALDERMAN CROSSMAN

THE MAYOR
ALDERMAN AMEY
ALDERMAN DEAN
ALDERMAN HICKSON
ALDERMAN MRS MORSE
ALDERMAN RIDGEON
(*Vice-Chairman*)
COUNCILLOR AUKER
COUNCILLOR BRADFORD
COUNCILLOR MISS CANE
COUNCILLOR MRS DAVID
COUNCILLOR GOUGH-GOODMAN
COUNCILLOR MRS KALDOR

COUNCILLOR DR KOLBERT
COUNCILLOR PERCIVAL
COUNCILLOR REID
DR W. HAMILTON
MRS G. HICKSON
MR A. HOLDEN
MISS D. A. HUMPHRIES
MR E. S. MANSFIELD
THE REV. CANON P. A. TAYLOR
COUNTY ALDERMAN MRS HEPHER
COUNTY ALDERMAN MRS PARSONS
COUNTY ALDERMAN PAYNE

Primary Education and Special Services Sub-Committee (1971-72)

Chairman ALDERMAN DEAN

THE MAYOR
ALDERMAN AMEY
ALDERMAN CROSSMAN
COUNCILLOR AUKER
COUNCILLOR BRADFORD
COUNCILLOR MISS CANE
COUNCILLOR MRS KALDOR

COUNCILLOR REID
MRS G. HICKSON
MISS D. A. HUMPHRIES
MR E. S. MANSFIELD
THE REV. CANON P. A. TAYLOR
COUNTY ALDERMAN MRS HEPHER

HOUSING COMMITTEE (1971-72)

Chairman ALDERMAN CUNINGHAM

ALDERMAN MRS BURN
ALDERMAN DR MAITLAND
ALDERMAN MRS MORSE
COUNCILLOR MRS HOWE
COUNCILLOR MALTBY

COUNCILLOR POWLEY
(*Vice-Chairman*)
COUNCILLOR REILLY
COUNCILLOR P. C. WRIGHT

SECTION 2. STAFF AND ORGANIZATION OF THE DEPARTMENT

PRINCIPAL OFFICERS OF THE DEPARTMENT

Medical Officer of Health and Principal School Medical Officer

CYRIL G. EASTWOOD, M.D., CH.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H.,
F.R.S.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer

CATRIONA M. GOURLAY, M.B., CH.B., D.P.H.

Senior Assistant Medical Officer

ANNA M. HARGREAVES, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Principal School Dental Officer (County and City)

J. C. MCINTYRE, L.D.S. (from 1/1/71)

Area Dental Officer

DAVID H. LYLE, B.D.S., L.D.S.

Chief Public Health Inspector

J. F. EDWARDS

Certificate of the Royal Society of Health and Sanitary Inspectors' Joint Board
Meat and Foods Certificate of the Royal Society of Health
Certificate in Sanitary Science of the Royal Society of Health
Certificate in Smoke Inspection of the Royal Society of Health

Chief Administrative Assistant

R. J. MITTON, M.R.I.P.H.H., A.R.S.H.

ORGANISATION OF THE DEPARTMENT

The Medical Officer of Health (DR C. G. EASTWOOD), The Deputy Medical Officer of Health (DR C. M. GOURLAY) and secretary (MISS M. SMITH) work as a team in the overall management of the department and deal with matters concerning infectious disease. Apart from this the department is divided into four main divisions: the Administration and Supplies division, the Environmental Hygiene division, the Medical and Welfare Services division and the School Dental Service division. The Medical and Welfare Services division covers such a wide range of functions that it is further sub-divided into sections and one or two of the larger sections contain separately organised sub-sections.

ADMINISTRATION AND SUPPLY DIVISION

Principal functions. All matters relating to advertising for, interviewing and appointing staff, testimonials, staff housing, wages, salaries and time sheets, regrading, absences and car allowances. Ordering and purchase of goods and equipment and keeping inventories of these. Everything to do with the checking and payment of accounts. Alterations to and maintenance of buildings. The supply of uniforms and protective clothing. The preparation of the annual estimates and agendas and reports for committees.

Staff: Chief Administrative Assistant: (MR R. J. MITTON—
Head of Division)
Administrative Assistant: (MR I. L. SHAW)
Accounts Clerk
Correspondence Clerk
3 other clerks

ENVIRONMENTAL HYGIENE DIVISION

Principal functions: Atmospheric pollution, purity of the water supply, supervision of the sale of food and drugs, inspection of meat and slaughterhouses and supervision of food premises and catering establishments. Repairs to houses, improvement of old houses or their closing and demolition. Disinfestation of premises, inspection of factories, offices, shops, railway premises and common lodging houses. Administration of the Rag Flock Acts, Diseases of Animals (Waste Foods) Order, Animal Boarding Establishments Act and Riding Establishments Act, Rodent Control, noise abatement and the control of caravan sites.

Staff: Chief Public Health Inspector: (MR J. F. EDWARDS—
Head of Division)
Deputy Chief Public Health Inspector: (MR G. T. PHILLIPS)
3 Divisional Public Health Inspectors
6 District Public Health Inspectors
3 Meat Inspectors
2 Technical Assistants
3 Pupil Inspectors
Senior Clerk
Clerk
Shorthand/typist
Driver/handyman
4 Ratcatchers

MEDICAL AND WELFARE SERVICES DIVISION

Principal functions: Home helps, health visiting, home nursing, midwifery and infant welfare. The School Health Services. Welfare of old people, the blind, disabled, partially sighted, physically handicapped and mentally sub-normal or mentally ill. (Services marked with an asterisk were transferred to the County Council on 1 April 1971).

Staff: Senior Assistant Medical Officer: (DR A. M. HARGREAVES—*Head of Division*)

**Seymour House Geriatric Centre Sub-section*

Superintendent: (MR G. DODD—*Head of Sub-section*)

Deputy Superintendent: (MRS A. M. WILLIAMS)

3 Attendants

Physiotherapist

Occupational therapist

Cook

3 Domestic helpers

Driver/handyman

Nursing Services Section

Superintendent Nursing Officer: (MISS M. LIVESEY—*Head of Section*)

18 Health Visitors (1 senior)

6 Student Health Visitors

17 District Nurses (1 senior)

12 Midwives (1 senior)

Part-time Clerk

Maternity and Child Health Service Section

Assistant Medical Officer: (DR S. B. ORAM—*Head of Section*)

Part-time Medical Officers

Section Clerk

2½ Clerks

**Sedley Nursery Sub-section*

Matron: (MRS E. CALLOW—*Head of Sub-section*)

Deputy Matron: (MRS WATSON)

Warden: (MISS RACEY)

4 Nursery Nurses

4 Nursery Students

Cook

3 Domestic Helpers

School Health Service Section

School Medical Officer: (DR M. MASINA—*Head of Section*)

5 Consultants and part-time medical officers

2 Physiotherapists

Audiometrician

Section Clerk

2½ Clerks

Cerebral Palsy Unit Sub-section

Senior Physiotherapist: (MRS J. M. SECCOMBE—
Head of Sub-section)
2 Physiotherapists

Speech Therapy Sub-section

Part-time Senior Speech Therapist: (MRS H. HRAMTSOV—
Head of Sub-section)
5 part-time Speech Therapists

***Home Help Section**

Home Help Organiser: (MRS M. COOPER—*Head of Section*)
Deputy Home Help Organiser: (MISS GIBSON)
Assistant Home Help Organiser
Clerk
Home Helps

***Blind and Disabled Welfare Section**

Senior Welfare Officer (Mr A. L. Wright—*Head of Section*)
3 Welfare Officers
Welfare Assistant
Senior Clerk
Part-time Clerk/Typist

***Mental Health Section** (housed at 19 Gloucester Street)

Senior Mental Welfare Officer: (MR BULLWINKLE—
Head of Section)
2 Mental Welfare Officers

SCHOOL DENTAL SERVICE DIVISION

Functions: Dental care of expectant and nursing mothers. Dental inspection and treatment of school children.

Staff: Area Dental Officer: (MR D. H. LYLE—*Head of Division*)
Orthodontist: (MR A. B. HEWITT)
4 Senior Dental Officers/Dental Officers
3 Dental Auxiliaries
8 Dental Surgery Assistants
2 Dental Technicians

SUMMARY OF ESTABLISHMENT

Posts	Establishment		Posts Filled		Notes
	Full time	Part time	Full time	Part time	
Medical Officers	5	—	5	—	
Medical and Surgical Consultants ..	—	5	—	5	
Dental Officers	6	—	2	3	
Dental Auxiliaries	3	—	2	—	
Dental Technicians	2	—	1	—	
Dental Surgery Assistants	8	—	5	1	
Public Health Inspectors	11	—	11	—	including 3 divisional PHIs
Pupil Inspectors	3	—	2	—	
Meat Inspectors	3	—	2	—	
Superintendent Nursing Officer ..	1	—	1	—	
Health Visitors and School Nurses ..	19	—	14	4	including one senior H.V.
Student Health Visitors	6	—	1	—	
District Nurses	17	—	17	2	including one senior D.N. 3 Queen's Nurses 4 District Trained Nurses
Midwives	12	—	9	—	including one senior M.M.
*Mental Welfare Officers	3	—	3	—	
Physiotherapists	4	1	4	1	
Speech Therapists	—	6	—	6	
Orthoptist	—	1	—	1	
Audiometrician	—	1	—	1	
*Welfare Officers	4	—	3	—	
*Welfare Assistant	—	1	—	1	
*Nursery Staff:					
Matron, Deputy Matron, Warden and Nursery Nurses	7	—	6	—	
*Geriatric Day Centre Staff:					
Superintendent, Deputy Super- intendent, Attendants, Ambulance Driver, Occupational Therapist ..	7	—	6	—	
Administrative and clerical	21	—	19	4	
Sanitary	7	—	7	—	
*Domestic—Sedley Nursery	—	4	—	4	
—Seymour House	—	4	—	2	
—Others	—	1	—	1	
*Home Help Organiser, Deputy and Assistant	3	—	3	—	
*Home Helps	90	—	32	83	equivalent to 74 full time

*Staff marked with an asterisk were transferred to the County Social Services Department on 1st April 1970. (Three of the clerical staff were also transferred).

Public Health specialists are required by law to be registered medical practitioners with an approved post-graduate qualification in public health. They are the only medical specialists for whom a legal post-graduate requirement exists. Public health training embraces such things as law, administration, building construction, food hygiene and some aspects of civil engineering. The minimum period of training in medicine and public health is 9 years, but this takes no account of periods devoted to gaining necessary experience.

Public Health Inspectors are also required to undergo a prescribed training and to obtain a prescribed qualification. This training covers law, administration, food hygiene and meat inspection, building construction and some aspects of sanitary and civil engineering. The basic course lasts for four years.

Meat Inspectors have a course of training leading to a certificate, after which they work subject to supervision by fully qualified Public Health Inspectors.

Health Visitors are required to be State Registered Nurses who have also taken the first part of the midwives' examination (many qualify as midwives). They then proceed to a year's training in social work and are, in fact, the chief general social workers of a Health Department. The minimal training period in nursing and health visiting is four and a half years, quite apart from obtaining practical experience. An alternative form of training recently introduced is a four years' course of combined nursing and social work.

Dental Auxiliaries carry out dental work under the supervision and to the prescription of a qualified dentist. They fill the teeth of children, extract temporary teeth, perform scaling and give dental health education. The course of training lasts two years.

Dental Surgery Assistants help the dentist in his chairside work very much as a nurse helps a surgeon through an operation.

Speech Therapists give treatment for defects and disorders of voice and speech. Their patients are children who are slow to learn to speak, those who have some defect of articulation and those who have suffered loss of voice because of illness, injury or cerebral damage. They are not concerned with the art of public speaking, elocution or teaching people to overcome a particular dialect. A course of study lasts for three years and leads to the Licence of the College of Speech Therapists.

An **Orthoptist** is a medical auxiliary who, under the direction of an eye specialist, gives treatment for all kinds of squint and other conditions which disturb normal binocular vision. They undergo training for two and a quarter years to obtain the necessary qualification.

An **Audiometrician** tests the hearing by means of an audiometer—an instrument which determines accurately the range of pitch which each ear of a person can detect.

The nature of other posts on the establishment will be apparent from the designations.

PREMISES USED BY THE DEPARTMENT



- | | | |
|------------------------|--------------------------|--|
| 1 Kett House | 6 Sedley Nursery | 11 Newnham Clinic |
| 2 Auckland Road Clinic | 7 Chesterton Clinic | 12 Trumpington Clinic |
| 3 Romsey Clinic | 8 East Barnwell Clinic | 13 Lady Adrian School |
| 4 Cherry Hinton Clinic | 9 Castle Street Clinic | 14 Roger Ascham School |
| 5 Kingsway Clinic | 10 Norwich Street Clinic | 15 Seymour House
Geriatric Day Centre |

THE COST OF THE DEPARTMENTAL SERVICES

This Report deals with the calendar year 1971 but the Council's financial year runs from April to the following March. Because of this, it is difficult to give the cost of the various services for the period under review but the following figures (for the financial year ended March 31st 1972) are reasonably relevant.

<i>Service</i>	<i>Net expenditure £</i>	<i>Net expenditure per head of population £</i>	<i>Net expenditure per head per week (pence) p</i>
Environmental health	65,022	0.65	1
School Health Service	58,398	0.59	1
Other Welfare Services	157,113	1.58	3

Note: The population used is the Registrar General's estimated population in June 1971 (99,600).

Part II

**GENERAL STATISTICS
OF HEALTH AND
DISEASE**

SECTION 1. STATISTICAL SUMMARIES

STATISTICAL SUMMARY FROM 1875

	1875	1880	1890	1900	1910	1920	1930	1940	1950	1960	1970	1971
Population ..	30078	35000	41070	38607	40509	60154	60730	79140	90470	93840	100010	99600
Marriages ..					307	563	449			728	1027	990
Marriage Rate ..					15.1	18.7	14.7			15.5	20.5	19.9
1. Live Births ..	881	1040	934	923	799	1219	761	893	1322	1418	1223	1215
Live Birth Rate ..	29.3	29.7	22.7	23.9	19.7	20.2	12.5	11.3	14.6	15.1	12.2	12.2
Still Births ..	59				26	28	44	16	33	18	10	10
Still Birth Rate ..	94.7				31.5	22.4	54.6	17.6	24.3	12.5	8.1	8.0
Total Births ..	940				825	1247	805	909	1355	1436	1233	1225
Total Deaths ..	532	606	656	604	513	568	680	949	885	917	1027	961
1. Death Rate ..	17.7	17.3	15.9	15.9	12.6	9.4	11.3	11.9	9.7	9.7	10.3	9.6
2. Infant Mortality ..		168	134	122	61	50	31	34	26	26	18	15
I.M. Rate ..		161	143	132	76	41	40	38	19.6	18.3	14.7	12.0
Legitimate I.M. Rate ..					9.5		36	35	18.4	17.9	14.9	13.0
Illegitimate I.M. Rate ..					95.2				41.0	24.0	11.8	—
3. Neonatal Mortality ..										16	10	6
N.M. Rate ..										11.2	8.2	5.0
4. Illegitimate Live Birth Rate ..					5.3	5.1	4.4		5.5	5.8	7.0	7.0
Maternal Deaths ..							4	3	—	—	1	—
Maternal Mortality Rate ..							4.9	3.3	—	—	0.8	—

The records began in 1875 but, as they are incomplete, some of the figures for earlier years are approximations

For explanation of the various rates see the Statistical Summary for 1971

1. Uncorrected.

2. Deaths under 1 year.
3. Deaths under 4 weeks.

4. Illegitimate births **per cent.** of total live births.

STATISTICAL SUMMARY, 1971

	<i>Cambridge</i>	<i>England and Wales</i>
Area (acres)	10,060	37,135,000
Population: Census, 1971	98,519	48,815,000
Registrar-General's estimate at June 30th, 1971 (including 10,720 University Population)	99,600	
Number of persons per acre	9.90	
Number of Inhabited Houses.. .. .	32,274	
Number of Council Houses	9,713	
Estimated Rateable Value	£6,451,440	
Estimated Sum represented by a 1p. rate	£61,200	

Marriages

Number of Marriages Total	990
Marriage rate (number of persons marrying per 1,000 population)	19.9

Births

Live Births—		
{ Legitimate 1,130 (553 males, 577 females) } { Illegitimate 85 (46 males, 39 females) } Total	1,215	783,165
Live Birth rate (number of births per 1,000 population)	12.2	16.0
Live Birth rate corrected by comparability factor (0.97)	*11.8	16.0
Illegitimate live births per cent of total live births	7.0	8.0
Still Births { Legitimate 8 (5 males, 3 females) } { Illegitimate 2 (1 males, 1 female) } Total	10	9,898
Still Birth rate (number of still births per 1,000 total births)	8.0	12.0
Total Live and Still births	1,225	793,063

Deaths

449 males, 512 females Total	961	567,345
Death rate (number of deaths per 1,000 population)	9.6	11.6
Death rate corrected by comparability factor (1.04)	*10.0	11.6
Maternal deaths (including abortion)	—	
Maternal mortality rate (maternal deaths per 1,000 live and still births)	—	
Infants deaths under 1 year { Legitimate 15 } { Illegitimate — } Total	15	13,726
Total infant mortality rate (deaths under 1 year per 1,000 live births)	12.0	18.0
Legitimate infant mortality rate (legitimate deaths under 1 year per 1,000 legitimate live births)	13.0	17.0
Illegitimate infant mortality rate (illegitimate deaths under 1 year per 1,000 illegitimate live births)	—	24.0
Neonatal mortality (deaths in { Legitimate 6 } first 4 weeks) { Illegitimate — } Total	6	9,113
Neonatal mortality rate (deaths in first 4 weeks per 1,000 live births)	5.0	12.0
Early neonatal mortality (deaths in 1st week)	3	7,750
Early neonatal mortality rate (deaths in 1st week per 1,000 live births)	2.0	10.0
Perinatal mortality (combined still-births and deaths in 1st week)	13	17,648
Perinatal mortality rate (combined still-births and deaths in 1st week per 1,000 live and still- births).. .. .	11.0	22.0

* See page 23 for explanation of Comparability Factor.

SECTION 2. VITAL AND MORTAL STATISTICS

POPULATION

The Registrar-General's estimate of the population of the City on June 30th 1971 was 99,600. This includes 10,720 members of the University. In 1970, the estimated total was 100,010 and the number of members of the University was 10,606.

Natural Increase of the Population The following figures show the natural increase or the excess of births over deaths since 1875:

Year	Population ¹	Live Births	Deaths	Natural Increase
1875	30078	881	532	349
1900	38607	923	604	319
1925	59020	838	609	229
1950	90470	1322	885	437
1960	93840	1418	917	501
1970	100010	1223	1027	196
1971	99600	1215	961	254

¹=Mid year estimate

MARRIAGES

There were 990 marriages of Cambridge people during 1971. The number of people marrying was, thus, 1,980, which gives a marriage rate (number of persons marrying per 1,000 of the population) of 19.9.

BIRTHS

The following table gives particulars of the city births for 1971:

	Live Births		Still Births	
	Legit- imate	Illegit- imate	Legit- imate	Illegit- imate
Males	553	46	5	1
Females	577	39	3	1
	1130	85	8	2
	1215		10	
TOTAL	1215		10	
Number of males born per 100 females	97.2			
Birth rates	12.2		8.0	
Live birth rate corrected by comparability factor (0.97)	11.8		—	

1911 children were born in Cambridge to parents not resident in the city. These are registered in the usual way, but are not included in the above table. 29 children, whose parents are Cambridge residents, were born outside the city, and these are included in the table.

The crude live birth rate was 12.2 births per 1,000 population. The rate for England and Wales is 16.0 and the average Cambridge rate for the last ten years is 13.8.

Comparison between our birth rate and that of other towns is complicated by the fact that all towns do not have a population of the same composition. Some places attract a larger number of retired people, and so the birth rate may seem unduly low. New industrial areas may have a high proportion of young married people with a correspondingly high birth rate. The Registrar-General, therefore, calculates a comparability factor and, when this is applied to the crude birth rate, the resulting figure is what the birth rate would be if Cambridge had a theoretical standard population. When all birth rates are based upon this same standard population, comparison of one with another becomes possible and useful.

Births in Institutions The proportion of infants born in Nursing Homes and Hospitals was 75.7 per cent of the total births, 1.8 per cent more than the preceding year.

The following is a summary of institutional births belonging to Cambridge:

	<i>Births</i>	<i>Percentage of total Births</i>
Private Nursing Homes	24	2.0
Maternity Hospital	903	73.7

DEATHS

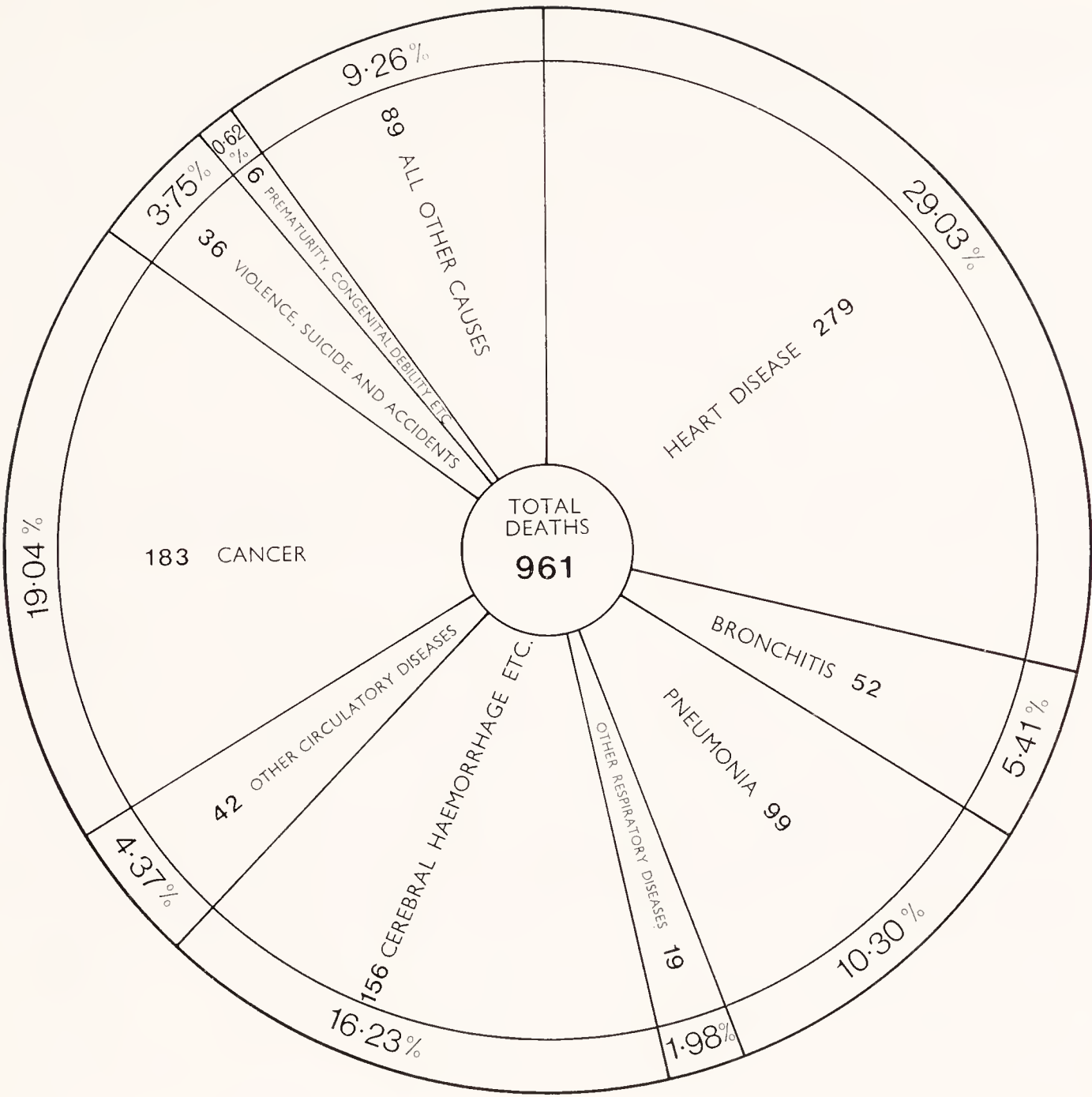
The number of deaths recorded was 961 (449 males, 512 females) a decrease of 66 compared with 1970. Cambridge residents who died away from the city are included in these figures. Strangers who died while in Cambridge are excluded.

The crude death rate was 9.6 per 1,000 of the population. The rate for England and Wales was 11.6.

As in the case of the birth rate, correction of the death rate by a comparability factor is statistically desirable. The factor in this case is 1.04 and the corrected death rate is 10.0.

Causes and Ages of Death during the Year 1971

Causes of Death	Total all ages	Under 4 weeks	4 weeks and under 1 year	AGE IN YEARS									75 and over
				1- 4	5- 14	15- 24	25- 34	35- 44	45- 54	55- 64	65- 74		
Tuberculosis of Respiratory System	3	—	—	—	—	—	1	—	—	—	1	1	
Late Effects of Respiratory Tuberculosis	1	—	—	—	—	—	—	1	—	—	—	—	
Other Infective and Parasitic Diseases	2	—	—	—	—	—	—	—	—	—	—	2	
Malignant Neoplasm													
Buccal Cavity, etc.	2	—	—	—	—	—	—	—	1	—	1	—	
—Oesophagus	5	—	—	—	—	—	—	—	—	3	2	—	
—Stomach	19	—	—	—	—	—	—	—	1	6	4	8	
—Intestine	23	—	—	—	—	—	—	—	2	2	7	12	
—Lung, Bronchus	36	—	—	—	—	—	—	—	3	13	12	8	
—Breast	24	—	—	—	—	—	—	—	4	6	7	7	
—Uterus	2	—	—	—	—	—	—	—	1	—	1	—	
—Prostate	14	—	—	—	—	—	—	—	—	1	4	9	
Leukaemia	6	—	—	—	1	—	—	—	—	1	1	3	
Other Malignant Neoplasms	52	—	—	1	2	3	1	2	6	10	14	13	
Diabetes Mellitus	10	—	—	—	—	—	—	1	1	1	1	6	
Other Endocrine etc. Diseases	1	—	—	—	—	—	—	—	1	—	—	—	
Anaemias	3	—	1	—	—	—	—	—	—	—	—	2	
Other Diseases of Blood, etc.	1	—	—	—	—	—	—	—	—	—	1	—	
Mental Disorders	1	—	—	—	—	—	—	—	—	—	—	1	
Other Diseases of Nervous System	9	—	—	—	1	—	—	—	1	2	1	4	
Chronic Rheumatic Heart Disease	12	—	—	—	—	—	—	—	1	—	5	6	
Hypertensive Disease	17	—	—	—	—	—	—	—	2	2	2	11	
Ischaemic Heart Disease	208	—	—	—	—	—	—	1	14	31	61	101	
Other Forms of Heart Disease	42	—	—	—	—	—	—	—	—	3	5	34	
Cerebrovascular Disease	156	—	—	—	1	—	—	3	7	5	43	97	
Other Diseases of Circulatory System	42	—	—	—	—	—	1	—	3	2	8	28	
Influenza	4	—	—	—	—	—	—	—	1	1	—	2	
Pneumonia	99	—	3	1	1	1	1	1	—	3	18	70	
Bronchitis and Emphysema	52	—	—	—	—	—	—	1	1	10	19	21	
Asthma	4	—	—	—	—	—	1	—	—	—	2	1	
Other Diseases of Respiratory System	11	—	2	—	—	—	—	—	—	3	2	4	
Peptic Ulcer	7	—	—	—	—	—	—	—	—	—	2	5	
Appendicitis	1	—	—	—	—	—	—	—	—	—	1	—	
Intestinal Obstruction and Hernia	5	—	—	—	—	—	—	—	—	—	—	5	
Cirrhosis of Liver	1	—	—	—	—	—	—	—	1	—	—	—	
Other Diseases of Digestive System	11	—	—	—	—	1	—	—	—	1	4	5	
Nephritis and Nephrosis	3	—	—	—	—	—	—	—	—	—	2	1	
Hyperplasia of Prostate	1	—	—	—	—	—	—	—	—	—	—	1	
Other Diseases, Genito-Urinary System	6	—	1	—	—	—	—	—	—	1	1	3	
Diseases of Skin, Subcutaneous Tissue	2	—	—	—	—	—	—	—	—	—	—	2	
Diseases of Musculo-Skeletal System	6	—	—	—	—	—	—	—	—	1	1	4	
Congenital Anomalies	6	3	—	1	—	—	—	—	1	—	1	—	
Birth Injury, Difficult Labour, etc.	2	2	—	—	—	—	—	—	—	—	—	—	
Other Causes of Perinatal Mortality	1	1	—	—	—	—	—	—	—	—	—	—	
Symptoms and Ill-Defined Conditions	9	—	2	—	—	—	—	—	—	—	—	7	
Motor Vehicle Accidents	18	—	—	—	1	5	2	1	2	2	2	3	
All Other Accidents	13	—	—	—	—	1	1	—	1	—	—	10	
Suicide and Self-Inflicted Injuries	5	—	—	—	—	—	2	1	1	—	1	—	
All Other External Causes	3	—	—	—	—	—	—	—	—	1	2	—	
TOTAL ALL CAUSES	961	6	9	3	7	11	10	12	56	111	239	497	



Deaths from Cancer of Lungs and Bronchi

1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
24	43	30	41	40	59	42	43	47	56	47	59	57	63	36

Analysis of Accidental Deaths	Road Accidents	..	..	..	..	..	18
	Consequent upon a fall	..	..	..	..	..	8
	Barbiturate poisoning	..	..	..	..	..	1
	Burns	..	..	..	..	..	1
	Decapitation	..	..	..	..	..	1
	Unexplained cot death	..	..	..	..	..	2
							31

<i>Analyses of Suicides</i>	Carbon monoxide poisoning	1
	Drowning	1
	Electrocution	1
	Barbiturate poisoning	1
	Cyanide poisoning	1
		5

Deaths in Public Institutions During the year there were 525 deaths of Cambridge residents in Public Institutions and Nursing Homes. This is 54·6 per cent of the total number of deaths. Last year the percentage was 56·6.

<i>Institution</i>	<i>Number of Deaths</i>	<i>Per cent of total Deaths</i>
Addenbrooke's Hospital	232	24.1
Maternity Hospital, Mill Road	3	0.3
Chesterton Hospital	145	15.1
Brookfields Hospital	15	1.6
Private Nursing Homes	30	3.1
Other Institutions	100	10.4
Total	525	54.6

Maternal Mortality There were no deaths during the year.

During the last ten years there have been no maternal deaths from sepsis but two from other causes. This gives death rates (per 1000 births) of *nil* and 0.144 respectively.

Infant Mortality By infant mortality is meant the number of deaths of infants under 1 year of age. This was 15 in 1971.

The Infant Mortality rate is the number of deaths under 1 year per 1,000 live births. The rate was 12.0 in 1971. The rate for England and Wales was 18.0.

The Infant Mortality rate is a delicate index of the general healthiness of a community, since infants have a more tenuous grasp of life than older persons, and so tend to be more readily killed by disease and by poor environment. The following table shows the decline in the infant mortality rate during this century.

Year	No. of Infant Deaths	Infant Mortality Rate*	Percentage of total deaths at all ages	Infant Mortality rate for England and Wales*
1900	128	132	21.9	154
1910	61	76	12.0	105
1920	50	41	8.8	80
1930	31	40	4.6	60
1940	34	38	3.6	55
1950	26	20	2.9	30
1960	26	18	2.8	21
1970	18	15	1.8	18
1971	15	12	1.6	18

**These figures are rounded off to the nearest whole number and so may not quite agree with statements elsewhere in this Report*

Deaths from Stated Causes at Various Ages under 1 Year

<i>Causes of Death</i>	<i>Under 1 week</i>	<i>1-2 weeks</i>	<i>2-3 weeks</i>	<i>3-4 weeks</i>	<i>Total under 1 month</i>	<i>1-3 months</i>	<i>3-6 months</i>	<i>6-9 months</i>	<i>9-12 months</i>	<i>Total deaths under 1 year</i>
Neo-Natal Asphyxia	—	—	—	—	—	—	—	—	—	—
Congenital Heart Disease and Malformations	—	2	—	—	2	1	—	—	—	3
Premature Birth	3	—	—	—	3	—	—	—	—	3
Other Causes	—	1	—	—	1	2	3	2	1	9
Totals ..	3	3	—	—	6	3	3	2	1	15

Neonatal Mortality The decline in infant deaths shows that they are preventable in great measure, but there is a ‘hard core’ due to causes which are, probably, irremovable. Various kinds of congenital abnormality and prematurity of birth are examples of such causes of death. These causes operate very early in life, in the first week or fortnight as a rule. It will be seen from the preceding table that 6 out of the 15 infant deaths occurred in the first month, and this may be expressed as a neo-natal mortality rate of 5.0 (deaths under 4 weeks per 1,000 live births).

Early Neonatal Mortality This relates to deaths in the first week of life and is a refinement of the foregoing. There were 3 such deaths in 1971—half the neonatal deaths. This gives an early neonatal mortality rate of 2.0 (deaths in the first week per 1,000 live births).

Perinatal Mortality Some causes of early death may equally operate just before birth causing still-birth. Still-births and deaths in the first week of life added together constitute the perinatal mortality. This was 13 in 1971 and gives a perinatal mortality rate of 11.0 per 1,000 still and live-births.

SECTION 3. THE INCIDENCE AND CONTROL OF DISEASE

INFECTIOUS DISEASES NOTIFICATIONS RECEIVED DURING THE YEAR

	<i>Under 1 year</i>	<i>1-2 years</i>	<i>3-4 years</i>	<i>5-9 years</i>	<i>10-14 years</i>	<i>15-24 years</i>	<i>25-44 years</i>	<i>45-64 years</i>	<i>65 yrs over</i>	<i>Age un- known</i>	<i>Total</i>
Scarlet Fever	1	1	7	17	3	1	—	—	—	1	31
Dysentery	1	1	3	7	1	3	4	—	—	1	21
Measles	11	43	60	83	4	—	1	—	—	8	210
Infective Hepatitis	—	—	—	—	1	9	2	1	1	2	16
Tuberculosis:											
<i>Respiratory</i>	—	—	—	—	1	6	2	4	6	—	19
<i>Non-Respiratory</i>	—	—	—	—	—	1	2	3	—	—	6
Whooping Cough	6	4	2	4	—	—	—	—	—	—	16
Malaria	—	—	—	—	—	1	—	—	—	—	1

The case of Malaria contracted the disease while abroad.

VACCINATION AND IMMUNISATION

Smallpox During the year 784 children were vaccinated in the City and 337 children were re-vaccinated.

Triple During the year 3253 doses of combined diphtheria, whooping cough and tetanus vaccine were given to children in the City. 867 children completed the course. 617 children were given a re-inforcing dose following earlier immunisation.

Diphtheria/Tetanus During the year 94 doses of combined diphtheria and tetanus vaccine were given to children in the City. 831 children were given a re-inforcing dose following earlier immunisation.

Tetanus During the year 644 doses of tetanus vaccine were given to children in the City. 648 children were given a re-inforcing dose following earlier immunisation.

Poliomyelitis During the year 3331 doses of poliomyelitis vaccine were given to children in the City. 874 children completed the course. 1624 children were given a re-inforcing dose following earlier immunisation.

Measles During the year 857 children in the City were immunised against measles.

Rubella During the year 1072 girls were immunised against rubella.

Tuberculosis B.C.G. vaccination was continued in schools during the year. 1414 children had skin tests. 139 were positive, 1227 were negative and 1219 were vaccinated.

INVESTIGATION AND DISINFECTION

354 visits were made to houses, schools, hospitals and places of work, investigating infectious diseases. This was additional to visits by medical officers and nursing staff (for which see Part IV of this Report.)

During the year 93 disinfections of premises were carried out. We also assist the police from time to time and have an arrangement with the public libraries for preventing the spread of infection through books. 361 articles of gift clothing for overseas were disinfected here in compliance with government requirements.

As far as possible every immigrant is visited soon after arrival. Arrangements are then made for registration with a general practitioner and for chest X-ray photographs. The system has worked well so far and during the year public health inspectors paid 135 visits.

VENEREAL DISEASE

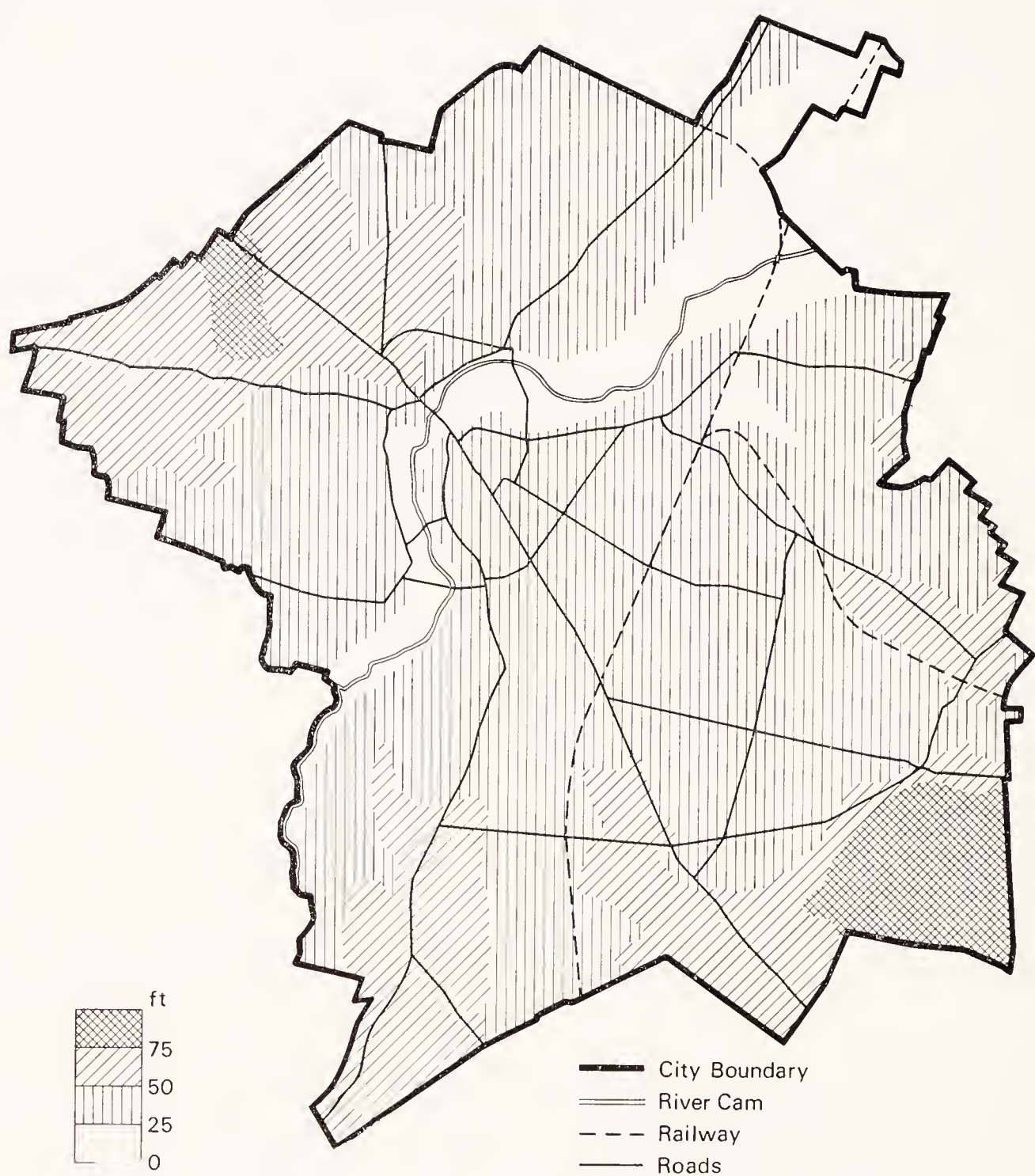
Information about treatment is made available through notices displayed in such places as public lavatories. Until recently, health visitors carried out the tracing of contacts but the venereal disease clinic has now appointed an enquiry officer for this work.

Part III
ENVIRONMENTAL
HYGIENE

SECTION 1. NATURAL AND SOCIAL CONDITIONS

TOPOGRAPHY

The City is situated in latitude 52° 12' N. and longitude 0° 7' E., about fifty miles north of London, on the midland side of East Anglia and in the southern part of the Fen District. The City is shaped like a very rough rectangle, about five miles from north to south and four miles from east to west. It is very low lying, the greater part being between 25 and 50 feet above sea level. In three places (near the railway station, at Trumpington and near Madingley) the ground rises above 50 feet and, on the boundary near to Girton, somewhat exceeds 75 feet. The only really high ground within the City boundary is at what may be termed the south eastern 'corner' where, at the beginning of the Roman road and exactly on the City boundary, a height of 225 feet is reached.



The City stands upon clay but this is overlain by gravel in a broad belt extending roughly from south-west to north-east. Through the middle, along this line, flows the River Cam which is the main means of drainage of the City. The river enters the City at the south-west, close to the 25 foot contour and leaves at the north-eastern extremity where the boundary is a little below 25 feet. The water is analysed periodically.

CLIMATE

As part of Great Britain, Cambridge shares in the insular climate but, since it is in a comparatively flat part of the country and facing the continent, it also shares to some extent in the Continental type of climate and falls somewhere between the truly insular and the truly continental. The prevailing winds come from the south-west and the rainfall is low relative to the rest of the country. There is an average of about 21 inches a year, with the greatest fall in October as a rule, and the least rain in February, although the actual number of rainy days is about the same in each of these extreme months.

The hours of sunshine amount to almost 7 per day in the middle of June and fall to less than 2 per day in December, averaging somewhat over 4 for the whole year. The relative humidity is, on the average, about 80, being at a maximum in December and January and a minimum about June.

The following list summarises the principal meteorological observations of 1971 (the figures in brackets are the averages for the past ten years):

Rainfall:

Total	..	..	..	..	19.9 inches	..	..	(20.98)
Number of days with rain	..	138	..	..				(153)
Days with 0.04 inches or more	..	97	..	..				(108)
Days with less than 0.04 inches	..	41	..	..				(45)
Heaviest fall in 24 hours	..	..	1.0 inches	(10th June)				(1.15)

Temperature:

Highest temperature in screen	..	84.1°F	(11th July)					(82.9°)
Lowest temperature in screen	..	23.5°F	(5th March)					(14.8°)
Lowest grass temperature	..	17.9°F	(16th February)					(9.6°)
			(5th March)					
Number of frosts (<i>i.e.</i> , 32°F. and below) in screen	..	..	52	..	..			(66)
Number of ground frosts (<i>i.e.</i> , 30°F. or below on grass)	..	67	..	..				(98)

Miscellaneous:

Hours of bright sunshine	..	1554.2	..	..				(1422)*
Days with fog	..	..	..	6	..	..		(10)
Days with thunder	..	..	3	..	..			(4)
Days with snow	..	..	7	..	..			(13)

*7 year average

INDUSTRIES AND COMMUNICATIONS

The University may be regarded as the oldest and one of the most important 'industries' of the City and, apart from its members, employs directly and indirectly a considerable number of people. The University Press may also be considered one of the city's principal industries. Other important trades and manufacturers are the production of radio and television equipment, scientific instruments, dairy equipment, cement and asphalt. Flour milling is carried on, and there are some other, smaller, industrial activities.

The city is well served by roads and railways, and there is an airport for private aviation immediately outside the boundary.

SECTION 2. THE ATMOSPHERE

ATMOSPHERIC POLLUTION

Smoke Control Orders Eight years ago the City Council approved the layout of 20 Smoke Control Areas to cover the whole city. It was originally envisaged that one area per year would become smokeless, but through various reasons, e.g. financial restrictions and fuel shortages, it has not been possible to proceed at the planned speed.

However, in 1971 a third smoke control area was surveyed and the Order will be submitted early in 1972 for confirmation by the Minister. The area, of 1035 acres, contains 1224 domestic premises and is westerly of the two existing areas.

Industrial Pollution 52 observations of chimneys were made and six offenders dealt with informally. Also 24 visits were made in connection with applications for prior approval of new boiler installations and related matters.

SECTION 3. WATER SUPPLIES

THE PUBLIC SUPPLY

Sources of Supply The water supply of the City is provided by the Cambridge Water Company (whose area of supply includes the Rural Districts of Chesterton and South Cambridgeshire, the Borough of St Ives, the Urban District of Ramsey and the Rural District of St Ives) and is obtained from five sources, east, south and south-west of the City. The water comes from a considerable depth in chalk. During 1971 the supply has been entirely satisfactory as regards quality and unrestricted supplies have been maintained.

The Fleam Dyke Well has a daily yield which varies seasonally between 3.0 and 3.6 million gallons. The well is 162 ft. deep and has a water-tight lining from top to bottom. The pumps are capable of delivery at the rate of 160,000 gallons an hour. The water as piped from the well is practically sterile. Although many thousands of samples have been examined *Bacterium Coli* has never once been found in 100 c.c. Despite this fact, a small precautionary dose of 0.08 p.p.m. of chlorine is administered.

The Fulbourn Well has a maximum yield of 2 million gallons a day. The well is 58 ft. deep. The chemical quality of the water is at all times excellent, but it is subject to slight intermittent bacterial pollution. Because of this the well water is given a substantial dose of chlorine (0.5 p.p.m.) followed by a contact period of half an hour before being dechlorinated and turned into supply. Bacteriological examinations (which are made at weekly intervals) have shown that this treatment invariably produces a sterile water.

The Great Wilbraham source comprises duplicate 14 in. diameter boreholes sunk to a depth of 180 ft., and united at a depth of 165 ft. Duplicate electrically driven submersible pumps each having a capacity of approximately 50,000 gallons per hour (1.2 million gallons a day) are installed but only one pump is operated at a time. Water from this source, the quality of which is as high as that from Fleam Dyke, is conveyed through two miles of 12 in. diameter main to Fleam Dyke where it blends with the Fleam Dyke water and receives the same token dose of chlorine.

The Babraham source comprises duplicate 17 in. diameter lined boreholes sunk to a depth of 150 ft. and united at a depth of 126 ft. Duplicate electrically driven pumps, each with a capacity of about 85,000 gallons per hour (2 million gallons a day), are installed but only one pump is operated at a time. After chlorination and dechlorination the water is delivered into the distribution system via three miles of 18 ins. diameter trunk main. To protect the quality of the water at source the Company has constructed and operates a sewage disposal system serving two farms and 14 cottages in the vicinity of the well. The water is not softened and has a hardness of 320 p.p.m.

The Melbourn Source comprises fourteen boreholes each 200 ft. deep, the largest being 48 inch diameter. There are 500 ft. of adits in the Burwell Rock about 150 ft. below the surface of the ground.

This source yields 2.5 to 3.0 million gallons of water a day. After super-chlorination (a dose of 0.5 p.p.m.) and dechlorination the water is delivered into the Cambridge distribution system through 10 miles of 24 inch diameter trunk main. The water is not softened and has a hardness of 300 p.p.m.

Water Softening The water pumped from the Fleam Dyke, Fulbourn and Great Wilbraham Wells has a hardness of 250 p.p.m. At Cherry Hinton the trunk mains conveying the water to the city are tapped, and one half of the total flow is passed through a base-exchange softening plant in which the whole of the hardness is removed. Subsequently the hard and softened portions of the supply are blended so that the water passing into supply from these three sources normally has a total hardness of 130 p.p.m. only.

Service Reservoirs On high ground round the City there are five covered service reservoirs having a combined capacity of 13.75 million gallons. These are connected to the trunk mains from the five sources of supply and act as balancing tanks. Thus, when the demand exceeds the rate of pumping, the balance flows out of the reservoirs and, conversely, when the rate of pumping exceeds the demand the balance flows into the reservoirs.

Quality of the Water During 1971 the supply has been entirely satisfactory as regards quality and unrestricted supplies were maintained.

During the year the water going into the supply was sampled for both chemical and bacteriological examinations. The water as supplied has no plumbo-solvent properties. The fluoride content of the water is less than 0.1 parts per million. The City and County Councils have agreed to the adjustment of fluoride; but final details have yet to be settled. No contamination of the supply occurred during 1971.

Chemical and bacteriological analysis have been constant and satisfactory throughout.

Number of Samples examined during 1971

			<i>Chemical</i>	<i>Bacteriological</i>
Raw water—Fleam Dyke	..	..	8	21
Raw water—Fulbourn	..	..	12	52
Raw water—Great Wilbraham	..	..	6	14
Raw water—Babraham	..	..	3	12
Raw water—Melbourn	..	..	3	12
Treated water—Fulbourn	..	..	nil	52
Treated water—Great Wilbraham	..	..	nil	2
Treated water—Babraham	..	..	nil	12
Treated water—Melbourn	..	..	nil	12
Drawn from the distribution system	..	..	4	38

The water, as supplied, is always bacteriologically sterile

The following report on the examination of a sample drawn from the distribution system on 6th April 1971 is typical:

Chemical Results in Milligrams per Litre

Appearance. Bright		Turbidity (A.P.H.A. units)	1
Colour (Hazen)	nil	Odour	nil
pH	7.3	Free Carbon Dioxide	24
Electric Conductivity	500	Dissolved solids dried at 180°C	340
Chlorine present as Chloride	20	Alkalinity as Calcium Carbonate	215
Hardness: Total	225	Carbonate	215
Nitrate Nitrogen	8.8	Non-carbonate	10
Ammoniacal Nitrogen	0.00	Nitrite Nitrogen	Absent
Albuminoid Nitrogen	0.00	Residual chlorine	0.02
Zinc, copper, lead and Iron	Absent	Oxygen Absorbed	nil

Bacteriological Results

	1 day at 37°C	2 days at 37°C	3 days at 20–22°C
Number of Colonies developing on Agar	0 per ml.	0 per ml.	0 per ml.
Presumptive Coliform	Present in — ml	Absent from 100 ml	Probable No 0 per 100 ml
Bact. Coli. (Type 1) ..	— ml	100 ml	0 per 100 ml
Cl. welchii reaction ..	— ml	100 ml	

Analyst's report:

This sample is practically clear and bright in appearance, neutral in reaction and free from iron and other metals. The water is hard in character but not unduly so and it contains no excess of mineral constituents. It is of very satisfactory organic quality and of the highest standard of bacterial purity.

These results are indicative of a pure and wholesome water suitable for public supply purposes.

Supply to Dwelling-houses:

(a) Directly supplied from tap	..	..	..	..	32,274
(b) Supplied by standpipes	..	..	..	..	None
(c) Supplied by private wells, etc.	..	..	..	..	None

SWIMMING BATHS

There are eleven private and three public swimming baths in the city. All were regularly tested for purity during the year and the results were generally good.

In the city council's indoor swimming pool at Parkside the water is heated to 74°F and is constantly re-circulated. During the re-circulation cycle the water is strained and filtered and then re-chlorinated before being heated and returned to the pool. The chlorination level is maintained at 1.5 p.p.m. in the main pool and 0.5 p.p.m. in the small pool. The whole contents of the pools, 22,000 gallons, is circulated every four hours.

SECTION 4. SUPERVISION OF FOOD AND DRUGS

GENERAL FOOD AND DRUGS SAMPLING

The purity and quality of food can be judged to a reliable extent through sampling and analytical procedures and by the number and nature of complaints received.

A wide variety of foods and drugs were submitted for analysis and with one exception the articles which were reported as 'non-genuine' were subjects of complaints. This seems to indicate that in the main food is not adulterated, is composed only of accepted ingredients and is fit to eat.

Seventy-two complaints were received during the year of which 16 concerned bread and cakes and 8 involved cheese. Foreign bodies and mould were once again the main causes for complaint. It was encouraging to note that only in four instances was improper stock rotation to blame.

During the year, the great debate about coding of prepacked food continued. The public health inspectors took advantage of the nation-wide interest in this subject and hammered home the need for a proper system of stock rotation particularly with the more perishable foods. One hopes that the degree of success achieved by this approach is reflected by the diminishing number of complaints attributable to the neglect of this responsibility.

The housewife, too, has become aware of the significance of some codes and, no doubt, is exercising her right to determine that the food she buys is fresh, by scrutiny of the goods on sale.

Complaints about cheese resulted from damage to vacuum and film packs which had gone unnoticed by shop staff. It is necessary for food displays to be examined at regular intervals and to remove such packs.

Legal proceedings were taken in these instances:

	<i>Fine</i>	<i>Advocate's fees</i>
1 Cement mortar in milk bottle	£20	
2 Unfit cheese	£5	
3 Unfit tin of soup	£10	£5
4 Yoghurt sold out of code and sour	£15	£10
5 Milk sold in dirty bottle	£5	

The following samples were submitted to the Public Analyst in Cambridge during the year:

Informal

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Apple Turnover	1	—	1
Ascorbic Acid Tablets	7	7	—
Bacon	7	7	—
Bakewell Tart	1	—	1
Baking Powder	2	2	—
Batter Mix	1	1	—
Biscuits	1	1	—
Bread	1	—	1
Bread Roll (buttered)	1	—	1
Butter	1	1	—
Cake Decorations	3	3	—
Camphorated Oil	2	2	—
Cheese (soft)	10	10	—
Cheese Spread	1	—	1
Chewing Gum	11	11	—
Chicken Fillets in Jelly	1	1	—
Chicken Supreme	1	1	—
Chocolate	4	4	—
Chocolate Sauce	3	1	2
Cod Roe	1	1	—
Coffee	10	10	—
Coffee and Chicory Essence	3	3	—
Coffee Mate	1	1	—
Cold Meats	4	4	—
Cooking Oil	3	—	3
Cornflour	1	1	—
Cream	7	6	1
Dates	1	—	1
Epsom Salts	10	10	—
Evaporated Milk	1	1	—
Fish	4	3	1
Fish in Wine Sauce	1	1	—
Fish Spread	1	1	—
Flour (plain)	6	6	—
Food Colouring	4	4	—
Fruit Salad	1	1	—
Gateaux	1	1	—
Ginger	9	9	—
Ice Cream	3	3	—
Ice Cream Mix	1	1	—
Instant non-fat milk	1	1	—
Lemons	3	3	—
Marmalade	1	1	—
Meatless Steaks	1	1	—
Milk	9	6	3
Pepper	3	3	—
Pineapple (cubes)	1	1	—
Postum Cocal Beverage	1	1	—
Potatoes	2	2	—
Potted Beef	1	1	—
Saviand	1	—	1
Smoked Salmon Paté	1	1	—
Stewed Steak	1	1	—
Tapioca	1	—	1
Tincture of Iodine	2	2	—
Tomato Puree	1	1	—
Tongue Paté	1	1	—
Total	163	145	18

Formal

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Whisky	2	2	—
Total	2	2	

MILK

At the end of 1971 the following licences were in force:

	<i>Number</i>
Pasteuriser	1
Dealer in pasteurised milk	85
Dealer in untreated milk	5
Dealer in sterilised milk	41
Dealer in ultra heat treated milk	34

No samples of milk were examined for brucella abortus under the Food and Drugs Act, 1955.

34 samples of designated milk were examined with the results given below:

<i>Designation of milk</i>	<i>No. of samples tested</i>	<i>Appropriate test</i>	<i>No. of samples</i>		
			<i>Passed</i>	<i>Failed</i>	<i>Void</i>
Pasteurised	25	Phosphatase	25	—	—
		Methylene Blue	18	—	7
Sterilised	5	Turbidity	5	—	—
Ultra Heat Treated	4	Colony Count	4	—	—

These figures demonstrate the excellent bacteriological quality of the milk supply, particularly praiseworthy in view of the vast scale of the industry.

ICE CREAM

78 samples were submitted to the Public Health Laboratory for bacteriological examination and were graded according to Department of Health procedure as follows:

Grade 1 (Satisfactory)	49
Grade 2 (Fair)	7
Grade 3 (Unsatisfactory)	13
Grade 4 (Very unsatisfactory).. .. .	9

Eleven of the samples in grade 3 and 4 were taken from one vendor during investigation of unsatisfactory hygiene.

The practice of serving ice cream from bulk containers has spread from cafes and restaurants to shops. The open display of various flavours of ice cream may look more attractive to customers but unless scrupulous attention is paid to handling of this food in a hygienic manner then it will also prove attractive to the growth of bacteria. It is significant that the only samples which were unsatisfactory were dispensed in this manner. Wrapped ice cream has given no trouble for many years.

The public health inspectors advised the vendors of 'open' ice cream about hygiene and the desired standards were restored.

LIQUID EGG (PASTEURISATION) REGULATIONS, 1963

There are no egg pasteurisation plants in the City and no samples of liquid egg were submitted to the Alpha-amylase test during the year.

MEAT INSPECTION

During the year one of the two slaughterhouses licensed to export fresh meat to the continent had the licence withdrawn. This action was taken because it was not possible to separate the beef and pig lines by an empty space of at least five inches or by a wall at least three metres high.

The other export licence is held by Messrs Pink Bros., who export horse meat to France. To comply with licence requirements a casualty slaughterhouse was built next to the main slaughterhouse. This is to ensure that a sick horse does not spread infection or disease by being slaughtered in the main slaughterhouse. 564 horses were killed during the year, the majority being exported.

The number of animals killed in the City rose by 24,819 to a record 169,170. During the last two years the number of animals killed at the five slaughterhouses in the City has risen by approximately 54 %. This increased work load has been borne by the inspectorate and a first class service has

been rendered. However, to ensure this service other important routine work has suffered seriously as can be seen in other parts of the report. Approval is, therefore, being sought for an increase in the establishment to restore the balance.

A total of 22,293 animals (representing 13.2% of the total kill) were found to have some part or organ diseased. The amount of meat rejected by inspectors as being unfit for human consumption was 77 tons. This included five bovine carcasses and three hundred and eighty two pig carcasses.

For the first time since records began no case of bovine tuberculosis was recorded. It is also encouraging to note the reduction in the incidence of *cysticercus bovis* and fascioliasis.

The Department, in conjunction with the Ministry of Agriculture, Fisheries and Food, commenced a sampling survey of pigs and sows in an attempt to establish the incidence of *Trichinella Spiralis*. It is too early yet to give any positive trends.

It was found necessary to apply for control of the hours of slaughtering at F.M.C. (Meat) Ltd slaughterhouse in Cheddars Lane. This was after several informal requests to finish slaughtering at a reasonable time had been ignored and slaughtering was continuing until 11 p.m. on several nights.

Graph of all animals killed (shown as cattle units) from 1949
1 cattle unit=1 beast or 2 pigs or 3 calves or 5 sheep.



Weight of meat condemned

	<i>Tons</i>	<i>Cwts</i>	<i>Sts</i>	<i>Lbs</i>
Beef	17	16	4	6
Mutton	—	10	2	6
Pork	58	19	0	6
Veal	—	5	6	9
	77	11	5	13

Percentage of carcasses

	<i>Cattle, excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>
Number killed	12,857	124	50	7,190	148,949
Number inspected	do.	do.	do.	do.	do.
<i>All diseases except Tuberculosis and Cysticerci:</i>					
Whole carcasses condemned	5	4	4	7	382
Carcasses of which some part or organ was condemned	2,165	6	3	261	19,858
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci	16·8%	8·1	14	3·7	13·5
<i>Tuberculosis only:</i>					
Whole carcasses condemned	—	—	—	—	—
Carcasses of which some part or organ was condemned	—	—	—	—	1,049
Percentage of the number inspected affected with Tuberculosis	—	—	—	—	0·7%
<i>Cysticercosis:</i>					
Carcasses of which some part or organ was condemned	15	—	—	—	—
Carcasses submitted to the treatment by refrigeration	14	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Figures for liver fluke, were as follows:

	<i>Cattle</i>	<i>Cows only</i>
1949	15.5 %	18.3 %
1950	24.4 %	16.1 %
1951	20.7 %	13.0 %
1952	20.6 %	12.1 %
1953	14.7 %	8.05 %
1954	16.6 %	7.9 %
1955	28.5 %	6.3 %
1956	20.4 %	3.8 %
1957	14.25 %	1.9 %
1958	21.0 %	9.46 %
1959	28.74 %	9.86 %
1960	17.64 %	3.8 %
1961	16.0 %	7.4 %
1962	12.4 %	4.9 %
1963	13.8 %	4.1 %
1964	13.3 %	28.0 %
1965	14.8 %	Nil
1966	23.4 %	0.4 %
1967	32.1 %	Nil
1968	28.6 %	2.3 %
1969	25.4 %	0.3 %
1970	17.9 %	9.6 %
1971	7.6 %	Nil

This disease caused the loss, during the year, of 593 beasts’ livers and 387 parts, no cow’s livers and no parts, and 68 sheep’s livers.

The figure for cysticercus bovis, a parasitic disease affecting animals and human beings, were as follows:

	<i>Cattle</i>	<i>Cows only</i>
1949	11 cases	
1950	28 cases	7 cases
1951	24 do.	6 do.
1952	41 do.	2 do.
1953	24 do.	– do.
1954	38 do.	1 do.
1955	43 do.	– do.
1956	22 do.	1 do.
1957	66 do.	– do.
1958	82 do.	1 do.
1959	53 do.	– do.
1960	57 do.	– do.
1961	31 do.	– do.
1962	31 do.	– do.
1963	92 do.	– do.
1964	137 do.	– do.
1965	50 do.	– do.

1966	189	do.	—	do.
1967	266	do.	—	do.
1968	270	do.	—	do.
1969	103	do.	—	do.
1970	32	do.	—	do.
1971	15	do.	—	do.

The 15 cases discovered represents .1 per cent of all cattle slaughtered.

INSPECTION OF FOOD OTHER THAN MEAT

<i>List of Foods condemned</i>						<i>Tons</i>	<i>Cwts</i>	<i>Sts</i>	<i>Lbs</i>
Avocado pears	..	..	..	..	..			3	8
Bacon	..	..	..	..	..		9	5	0
Bananas	..	..	..	..	..		16	5	8
Biscuits	..	..	..	..	..			3	5
Butter	..	..	..	..	..		4	0	0
Cake mix	..	..	..	..	..			2	1
Cereals	..	..	..	..	..			2	3
Chickens	..	..	..	..	..		8	9	6
Cucumbers	..	..	..	..	..		2	2	8
Dried fruit	..	..	..	..	..		1	6	7
Dried vegetables	..	..	..	..	..			4	5
Ducks	..	..	..	..	..		1	1	4
Egg and Veal pie	..	..	..	..	..			1	11
Fish	..	..	..	..	..			5	9
Flour	..	..	..	..	..			7	4
Horses	..	..	..	..	..		16	0	8
Pastas	..	..	..	..	..		6	2	6
Pizza pies	..	..	..	..	..	..	2	2	12
Potato crisps	..	..	..	..	..			3	13
Salt	..	..	..	..	..			9	2
Sugar	..	..	..	..	..			1	1
Tomatoes	..	..	..	..	..		11	1	12
Turkeys	..	..	..	..	..		1	0	8
Unidentified tins	..	..	..	..	..		1	5	6
Total						4	9	0	7

Frozen Food Packets—3,650

Smaller quantities of the following were also dealt with

Baby food	Cough mixture	Milk powder	Sauce
Beverages	Dessert powder	Mincemeat	Soft drinks
Cauliflowers	Fresh cream	Pickled eggs	Suet
Cheese	Ground almonds	Pickles	Sweets
Cooking fat	Ice cream	Rice	Yoghurt
Cooking oil	Malt vinegar	Salad cream	

Tinned Goods

Meat	536
Fish	365
Fruit	4050
Jam/Marmalade	104
Soup	117
Vegetables	2664
Milk	71
Cream	5
Milk Puddings	226

SUPERVISION OF FOOD PREMISES

There are 865 food premises in the City and the following figures show the various trades carried out. The difference in the totals is accounted for by the fact that many places sell more than one commodity:

<i>Premises</i>	<i>Number</i>	<i>Fitted to comply with Reg. 16*</i>	<i>Fitted to comply with Reg. 19*</i>
Bakehouses	15	—	—
Butchers Shops	75	1	1
Fish and Chips Shops	26	—	—
Restaurants	74	12	6
Residential Catering	80	—	—
Licensed Premises	221	2	1
Food Manufacturers	12	—	—
Canteens	101	—	—
Dairies	3	—	—
Stalls	34	—	—
Grocery	98	1	1
Greengrocery	60	—	1
Wet Fish Dealers	14	—	—
Chemists	16	—	—

* Of the Food Hygiene (General) Regulations, 1960

There are no poultry processing plants within the district.

Certain premises which are used for the manufacture, storage or sale of some kinds of food have to be registered with the Council under Section 16 of the Food and Drugs Act, 1955. They are divided as follows:

Manufacture and sale of ice cream	1
Sale only of ice cream	270
Preparation of sausages and potted, pressed or preserved food	90

Five new applications for the sale of ice cream were granted during the year.

Visits made to food premises numbered 838 and 107 notices requiring compliance with the Food Hygiene Regulations were given.

Revised food hygiene regulations came into force on 1st March 1971. Their application was extended to mills and refineries as well as to farm premises where eggs, fruit and vegetables are packed and stored.

The principal changes from the Regulations of 1960 concerned the separation of unfit food from that food which is to be offered for sale, the prevention of contamination of human food by that food intended for animals and the wearing of clean and washable overclothing by persons handling open food.

The requirements for the protection of open food from risk of contamination were made more explicit. Such food must not be placed where customers can touch it or sneeze or cough over it. Adequate screening to prevent infection of open food is essential.

Clean handling and clean premises are other essentials especially where food is cooked or otherwise prepared for immediate consumption. Restaurants continue to receive priority in attention. The nature of the contraventions found in this class of premises was principally due to lack of satisfactory standards of cleanliness of structure, fittings and equipment.

The job of cleaning is often regarded as a menial task and it can be a problem to obtain sufficient and interested staff. The remuneration for clearing up after someone else is generally not attractive enough, neither are the hours of work.

Nevertheless, people who run food businesses must accept the demands of hygiene and the costs involved in achieving satisfactory standards. Responsibility is the key word and each and every person engaged in the handling of food must be made aware of the dangers and penalties of neglect.

Prosecution of restaurant owners for contravening the Food Hygiene Regulations was successful in two instances resulting in fines of £60 and £200, each with advocates fees.

There has been a reluctance by market stall holders to meet the requirements of the regulations applicable to their type of business. Continuous supervision by regular inspection has been necessary to achieve the desired standard.

Twenty four notices were served in which a total of 120 contraventions were listed.

One of the main problems has been the littered state of the areas around stalls. Waste receptacles have been provided at each stall for retention of materials prior to their disposal in the container provided by the Council. This container is emptied regularly by the City Surveyor's Department.

For wintry conditions, food handlers prefer their normal warm overcoats and raincoats instead of their clean washable overclothing.

Handlers of food at stalls selling only fruit and vegetables are permitted to use the washing facilities provided in the public conveniences rather than each stall having its own. This exemption is not granted to the stall holders selling cheese and wet fish who have to provide additional facilities for washing equipment.

SECTION 5. HOUSING

REPAIRS TO HOUSES

Number of houses in which repairs were done:

(a) Housing Act 1957:					
(i) formal action	..	..	..	..	—
(ii) informal action	..	..	..	..	—
					—
Sub-total:					—
					—
(b) Public Health Act 1936:					
(i) formal action	..	..	..	..	6
(ii) informal action	..	..	..	..	45
					—
Sub-total:					51
					—
					—
TOTAL:					51
					—
work involved 261 visits.					
					—

This work involved 261 visits.

NEW HOUSES

Dwellings erected by the Local Authority and private enterprise since 1919.

	<i>Erected by the Local Authority</i>	<i>Erected by others</i>	<i>Total</i>
1920	40	23	63
1921–1930	1226	1192	2418
1931–1940	1417	3382	4799
1941–1950	1558	279	1837
1951–1960	2970	1673	4643
1961–1970	2765	3034	5801
1971	280	325	605
Totals	10256	9910	20166

IMPROVEMENT AND CLEARANCE OF HOUSES

Progress in Housing Clearance

Housing Act, 1957, Sections 16 and 17

(Also voluntary action)

Individual Houses

	<i>Action taken during 1971</i>
Closing orders made	15
Undertakings accepted (not to use for human habitation) ..	2
Undertakings accepted (to make houses fit)	18
Demolitions following Undertakings	23
Demolition (by owners) (Demolition Orders)	4
Demolished by private concerns (voluntarily)	28
Purchased by local authority for:	
Temporary accommodation	—
Demolition	1
Improved out of 'demolition' class	6

Housing Financial Provisions Act, 1958. Section 3

Certificates of unfitness:	
Issued	9
Demolished	0

Housing Act, 1957. Section 42

Clearance area procedure

Post-war clearance areas:	
Demolished	11
Still occupied	75

Allocation of Council houses absorbed during the year: ..	33
Individual unfit houses represented to the Council: ..	53

Houses demolished after action by the Council

Before the year	1930	..	..	..	18
During the years	1930–1939	..	..	..	438
do.	1940–1945 (War Years)				36
During the year	1946	..	..	..	5
do.	1947	..	..	..	–
do.	1948	..	..	..	3
do.	1949	..	..	..	4
do.	1950	..	..	..	7
do.	1951	..	..	..	11
do.	1952	..	..	..	25
do.	1953	..	..	..	19
do.	1954	..	..	..	6
do.	1955	..	..	..	23
do.	1956	..	..	..	66
do.	1957	..	..	..	87
do.	1958	..	..	..	93
do.	1959	..	..	..	102
do.	1960	..	..	..	138
do.	1961	..	..	..	140
do.	1962	..	..	..	172
do.	1963	..	..	..	99
do.	1964	..	..	..	38
do.	1965	..	..	..	72
do.	1966	..	..	..	202
do.	1967	..	..	..	143
do.	1968	..	..	..	106
do.	1969	..	..	..	66
do.	1970	..	..	..	51
do.	1971	..	..	..	38
Total					2208

Improvement of Houses A major step forward in 1971 was the declaration of the City's first General Improvement Area. This was contained in the area bordered by Newmarket Road, River Lane, Riverside and Abbey Road and included 268 houses, of which 72 needed major improvement.

Certain criteria are necessary for an area to qualify. The houses must be good enough to improve and the owners must not so far have been moved to carry out improvements themselves. As well as internal improvements the street scene is improved by City Architect and City Surveyor.

It might well be asked do we have to neglect our houses to qualify for help? Broadly speaking, the answer is 'yes'.

An Improvement Area Committee was formed and a house, 61 River Lane, was acquired and used to demonstrate how it could be done. This

house was in poor repair and lacked hot water, bath and internal water closet. It was, frankly, quite dauntingly decrepit. After some weeks of work the transformation was, to say the least, surprising. The house was open to the public for several weeks, staffed by council officers. More than 800 visitors were shown over the house and it is hoped that many applications for grants were stimulated. So far 9 firm applications have been received from the area.

This improvement area was an example of harmonious co-operation between council departments.

SECTION 6. OTHER MATTERS OF ENVIRONMENTAL HYGIENE

REFUSE DISPOSAL

The disposal of refuse is effected by controlled tipping in disused marl pits in Coldham's Lane. The refuse is consolidated in layers and covered daily with hard material.

SEWERAGE AND SEWAGE DISPOSAL

The City is sewered mainly on the 'separate' system, the foul sewers discharging to either the main pumping station at Riverside or direct to the sewage treatment works at Milton. The surface water is kept separate and discharged to the river by a number of outfalls.

Foul sewage discharged to the Riverside Pumping Station is lifted to the works at Milton where it passes through a modern treatment plant comprising detritus tank, filter beds and humus tanks before being passed to the River Cam. A system of recirculation of effluent is adopted to effect maximum purification from the plant. The works have been designed to produce an effluent to conform with the 'Royal Commission' standard which is required by the Great Ouse River Authority.

DRAINAGE WORK

When complaints about choked drains are received an employee of the department visits with rods and plunger. If the obstruction can be removed easily he does it. This is a service to the general public and we hope it is appreciated.

Only jobs requiring excavations or equipment which this department does not possess are dealt with either by the City Surveyor or the owner's contractors. Willingness to help on the part of the City Surveyor's staff makes this work much easier than it might be and we are grateful.

234 drains involving 373 houses were dealt with by the Health Department staff. A total of 43 sewers involving 186 houses were referred to the City Surveyor in 1971 the cost of the work alone amounting to £877.24.

DISINFESTATION

Arising out of inspections or complaints 14 Council and 66 other premises were found to be infested with bed bugs, fleas, lice, cockroaches or other pests and all were treated. Where necessary bedding and furnishings were disinfected or destroyed.

The Department has continued to advise householders and tradespeople on how to rid their premises of insect pests and we have assisted the police in dealing with verminous persons.

From time to time we come across people who have allowed themselves, their clothing and their house to become infested with vermin. The house

we can deal with as a routine; the clothing we can treat with a little more trouble; the person always proves a problem.

During 1971 there was the usual number of neglected old people to care for, usually men who have outlived their kith and kin. 17 men were disinfested but it is not usually possible to keep this type clean and return visits are often necessary.

Healthy men are cleaned up under the supervision of our handyman. The Public Health Committee makes an ex-gratia payment for each man disinfested as this distasteful task is quite outside the normal line of duty.

INSPECTION OF FACTORIES

The Council is responsible for enforcing parts of the Factory Act 1937 relating to sanitary accommodation for all factories.

Where there is no mechanical power in a factory, provisions on cleanliness, overcrowding, heating and ventilation are also administered by the Council. Routine visits are made by the Public Health Inspectors and a factory register has to be kept.

Lists of outworkers or persons who do work in their homes in connection with a factory must be regularly sent to the local authority.

There are 409 factories on the register.

31 visits were made to these factories during the year and 1 visit was made to building and engineering works. Notices regarding defects were served in 1 case, other matters being dealt with informally.

The following tables, which are in the form required by the Secretary of State for Employment and Productivity, give particulars of the administration of the Acts in this area.

Inspections for the Purposes of Provisions as to Health

<i>Premises</i>	<i>Number on Register</i>	<i>Number of</i>		
		<i>Inspections</i>	<i>Written notices</i>	<i>Occupiers prosecuted</i>
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	37	3	1	—
Factories not included in (i) in which Section 7 is enforced by the Local Authority	367	28	—	—
Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	5	1	—	—
TOTAL ..	409	32	1	—

Cases in which Defects were Found

<i>Particulars</i>	<i>Number of cases in which defects were found</i>				<i>Number of cases in which prosecutions were instituted</i>
	<i>Found</i>	<i>Remedied</i>	<i>Referred To H.M. Inspector</i>	<i>By H.M. Inspector</i>	
Want of cleanliness (S.1) ..	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6) ..	—	—	—	—	—
Sanitary Conveniences (S.7)					
Insufficient ..	—	—	—	—	—
Unsuitable or defective ..	1	1	—	—	—
Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) ..	—	—	—	—	—
<i>Total</i> ..	1	1	—	—	—

Registered Factories

Factories on the Register (Section 8) at the end of the year .. 409

Outworkers
(Factories Act, 1961, Sections 133 and 134)

Nature of Work	Section 133			Section 134		
	No. of out-workers in August list required by Section 133(1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel { Making etc., Cleaning and Washing	86	—	—	—	—	—
Household linen	—	—	—	—	—	—
Lace, lace curtains and nets	3	—	—	—	—	—
Curtains and furniture hangings	—	—	—	—	—	—
Furniture and upholstery	9	—	—	—	—	—
Electro-plate	2	—	—	—	—	—
File making	—	—	—	—	—	—
Brass and brass articles	—	—	—	—	—	—
Fur pulling	—	—	—	—	—	—
Iron and steel cables and chains	—	—	—	—	—	—
Iron and Steel anchors and grapnels	—	—	—	—	—	—
Cart gear	—	—	—	—	—	—
Locks, latches and keys	—	—	—	—	—	—
Umbrellas, etc.	—	—	—	—	—	—
Artificial flowers	—	—	—	—	—	—
Nets, other than wire nets	—	—	—	—	—	—
Tents	—	—	—	—	—	—
Sacks	—	—	—	—	—	—
Racquet and tennis balls	—	—	—	—	—	—
Paper bags	—	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	—	—	—	—	—	—
Brush making	—	—	—	—	—	—
Pea picking	—	—	—	—	—	—
Feather sorting	—	—	—	—	—	—
Carding, etc., of buttons etc.	—	—	—	—	—	—
Stuffed toys	—	—	—	—	—	—
Basket making	—	—	—	—	—	—
Chocolates and sweetmeats	—	—	—	—	—	—
Cosaques, Christmas stockings, etc.	—	—	—	—	—	—
Textile weaving	—	—	—	—	—	—
Lampshades	—	—	—	—	—	—
TOTAL	100	—	—	—	—	—

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Registration and Inspections 57 new premises registered during the year. General inspections and the number of visits of all kinds remained about the same as last year.

Number of Registered Premises

Offices	723
Shops	733
Warehouses	72
Catering	130
Fuel Storage	4
	1662

Contraventions 76 notices were served itemising 183 contraventions. It was not found necessary to institute legal proceedings as all the contraventions were remedied following service of informal notices.

Analysis of Defects

<i>Section</i>	<i>Subject</i>	<i>No.</i>
4	Cleanliness	5
5	Overcrowding	—
6	Temperature	35
7	Ventilation	8
8	Lighting	6
9	Sanitary Accommodation	27
10	Washing Facilities	6
11	Drinking Water	—
12	Clothing Accommodation	2
13	Sitting Facilities	—
14	Seats for Sedentary Workers	—
15	Eating Facilities (shops only)	—
16	Floors, Passages and Stairs	18
17	Exposed Machinery	6
24	First Aid Equipment	28
50	Display of Abstract	42
		183

Total number of notices served: 76.

Accidents 18 non-fatal accidents were reported and investigated. It was found necessary to remind the occupier of one shop of the obligation to report accidents under Section 48 of the Act.

The accidents were broken down into four main groups. These were:

Falls

<i>Cause</i>	<i>Injury</i>
1 over telephone cable on floor	fractured leg
2 from ladder	sprained shoulder
3 from ladder	head injury
4 greasy floor	fractured wrist
5 on level floor	head injury
6 on stairs	sprained ankle
7 on stairs	strained back

Loading and unloading

<i>Cause</i>	<i>Injury</i>
1 fall between vehicle and loading dock	leg injury
2 moving vehicle ran over foot	crushed toes
3 riding on tailboard lift	foot injury
4 fall between vehicle and loading dock	shoulder injury

Lifting and stretching

<i>Cause</i>	<i>Injury</i>
1 lifting carpet roll	strained back
2 stretching to open window	strained back
3 lifting box	strained back
4 stretching to shelves	partial slipped disc

Falling objects or striking objects

<i>Cause</i>	<i>Injury</i>
1 cellar flap falling	crushed toe
2 striking against object	head injury
3 striking against object	back injury

As can be seen from the breakdown of accidents, four accidents occurred in or about warehouses. Three of these four accidents involved loading and unloading vehicles. The accidents occurred while the persons were working on or from the tailboard.

Accidents have occurred where persons employed in registered premises have been helping to unload vehicles with hydraulic lift tailboards. Persons have stood on the tailboard or beside the tailboard while in motion and have been injured.

It is difficult to guard the inside edge to prevent the guillotine effect of the two edges coming together when the tailboard is at full height.

The Public Health Inspectors advise staff of the danger when cleaning moving parts of dangerous machines and the booklet *The Safe Use of Food Slicing Machines* was found to be very useful as an aid to this advice.

Offices, Shops and Railway Premises (Hoists and Lifts) Regulations 1968.

All plans of new buildings and of alterations to buildings are examined by the Department. Special note is made of alterations to lifts or the installation of lifts and this work is followed up closely by District Public Health Inspectors.

Reports on lifts are being received regularly from 'competent persons' and any reported faults are acted on immediately. It has been found at times that considerable delay has occurred due to difficulty in obtaining new machinery or spare parts. On one occasion facts were reported to the Town Clerk with a view to prosecution, because of such a delay. Work was quickly completed and prosecution was not necessary.

Works that have been required to make lifts comply with the regulations are:

- (a) fully enclosing lift shafts;
- (b) replacing worn gears and thrust bearings;
- (c) replacing worn ropes on hand operated 'dumb waiters';
- (d) carrying out work which allows hand operated 'dumb waiters' to be used in safety without the necessity of the operator putting his hands inside the lift shaft;
- (e) carrying out work to enable service engineers and maintenance workmen to work in safety, this work includes the guarding of balance weights and other moveable parts in shafts and inspection pits.

COMMON LODGING HOUSES

Of the three common lodging houses in the City, only the Church Army Hostel, in Willow Walk, is modern and satisfactory. It has 34 beds and is well run by resident Church Army Officers.

The Cyrene Community, with a seemingly bottomless fount of charity, exists precariously in an old public house in East Road. Nothing daunts these dedicated people: they set an example to those of their thoughtless critics who would never lift a finger to help. Even the Cyreniens, however, will be beaten by the widening of East Road and their search for alternative premises continues. They are at present negotiating a lease of another disused public house. In spite of warnings and forebodings we have had none of the trouble forecast—the Cyreniens deserve all the help they can get as they carry the cross for the otherwise destitute.

During 1971 the project for a new Salvation Army Hostel to replace the White Ribbon in East Road was finally abandoned. It was simply a question of money. The project would cost so much, the Council offered to contribute so much less—the Salvation Army were unable to find the difference. The result will inevitably be that forty-three men will be told to find their own accommodation, losing not only their beds but the firm and experienced support of the Salvation Army, the only family most of them have'

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

There are three premises registered under this Act. All were inspected during the year and found to be in a satisfactory condition.

DISEASE OF ANIMALS (WASTE FOODS) ORDER 1957

This order places on local authorities the responsibility of inspecting and licensing waste food boiling plants. Every collector of waste food must boil waste food material in a licensed plant before feeding it to animals or re-distributing for feeding purposes.

This is specially important in combatting outbreaks of Anthrax, Foot and Mouth Disease and Fowl Pest. The Anthrax bacillus and the Foot and Mouth virus will remain alive in bone marrow for a considerable length of time and it is extremely important that regular inspections are carried out of these boiling plants to see that they are in good working order and that waste food material is being boiled correctly.

There are 27 licensed waste food boiling plants in the City.

RODENT CONTROL

This service is carried out by the Department and is free to householders within the City. It has been found necessary to increase the charge to business premises from 52½p to 100p per hour. This is the first increase for some years. Business contracts are available if required. Ten new business contracts were taken out in 1971, this bringing the total to 36. Business contracts are more for rodent control than profit.

In 1971 883 complaints were received and 4028 visits were made by the ratcatchers. 1093 bodies were picked up and disposed of. The total number of rats killed would be considerably more than this, many others dying in the ground.

No sign of rodent immunity to the anti-coagulant poison warfarin was observed despite the increasing number of reports, from other parts of the country, of this trend. One fallacy which needs to be dispelled in a forth-right manner is the publicity given to the so called 'Super Rat'. There are no such creatures. There is an extensive range of rodenticides and techniques—where one fails another can be substituted.

The number of mice infestations in domestic premises has increased substantially. This is due to two reasons: the comparative difficulty of poisoning mice and the different food-handling habits of some of the recent immigrants. This is a matter for education in the handling and protection of food; also the disposal of waste. Many infestations have resulted from redevelopment in the City.

Bad site discipline and fly-dumping of refuse results in infestations found on new developments while building is in progress. Even when buildings are finished and occupied, mysterious appearances of rodents inside have been traced to inadequate sealing of service entries in the outside walls. These cost time and money to correct and should, of course, have been done automatically in the building work.

All rodenticide materials and methods of application were in accordance with the recommendations of the Ministry of Agriculture, Fisheries and Food.

ANIMAL BOARDING ESTABLISHMENTS ACT 1963

There are two premises registered under this Act, both of these were inspected during the year and found to be well run.

RIDING ESTABLISHMENTS

There is now only one licensed riding establishment in the City. This is the White Horse Riding Establishment in Barton Road. Both horses and premises were inspected and found to be satisfactory.

CARAVANS

There are four licensed caravan sites in the City, three of which have permanent planning permission.

The Caravan Club also have a site in the old quarry at Lime Kiln Hill. This site is only open during the season and can take nearly eighty vans. Only Caravan Club members are allowed to use the site and it caters very well for the tourists to the City in the summer months. It also stops indiscriminate parking within the surrounding area.

At the end of the year a survey of the fire fighting appliances at the caravan sites was carried out. It was found that since the Model Standards for Licensed Caravan Sites were produced in 1960, new, stricter control methods were now being recommended by the Fire Authorities. It was, therefore, decided to up-date the site licenses to include these new recommendations.

NOISE

Thirty-five noise complaints were received during the year. These were broken down into the following categories:

Domestic (barking dogs, noisy neighbours)	..	..	14
Commercial (refrigerator motors, music)	..	..	5
Industrial (compressors, machinery, pneumatic drills)	..		16

Elizabeth Way trunk road opened in July and a considerable amount of time was spent in surveying the new road and recording noise levels. Readings were taken before and after the road was opened, to assess the increase in noise level and the effect it was likely to have on the residents of the houses on the road.

The new road and bridge were built to take heavy vehicles and cars away from the centre of the City. The road took part of the rear garden of some houses and all the front garden of others. Where, previously, there had been little or no traffic, suddenly there was a major road bringing noise to within a few feet of living and bedroom windows.

At the end of the year a report was being prepared, for submission to the Council, on the results of the survey.

Part IV
WELFARE SERVICES

SECTION 1. GENERAL WELFARE SERVICES

HOME HELPS

The following table summarises the work which was done during the first quarter of the year. (The service was transferred to the County Council on 1st April 1971).

<i>No. of cases receiving help at beginning of period</i> (1)	<i>No. of new cases during period</i> (2)	<i>No. of cases terminated during period</i> (3)	<i>No. of cases remaining at end of period</i> (4)	
601	98	85	614	
<i>No. of persons receiving help during period</i> (5)	<i>No. of Home Helps employed during year</i> (6)		<i>No. of hours actually worked</i> (7)	<i>No. of cases investigated but no help given</i> (8)
	<i>full time</i>	<i>part time</i>		
699	35	90	29242¼	43

No. of patients on full rate	68
No. of patients on assessment	626
Total income	£3,134·03

Neighbourly Help In addition to the ordinary Home Help Service, we are able to arrange, from time to time, for neighbours to give help to old people living alone, especially in the evenings and at weekends.

HEALTH VISITING

The full establishment is 18 Health Visitor/School Nurses. The number of visits paid by the Health Visitors is shown in the following table. As the Health Visitors are also School Nurses, only a part of their time is given to Health Visiting.

First visits to infants born in 1971	..	..	1379
Subsequent visits to infants	..	..	3948
Visits to children born in 1970	..	..	2472
Visits to children born in 1966/69	..	..	3278
Visits to expectant mothers	..	..	164
Visits re care of the aged	..	..	3582
Visits to cases of tuberculosis	..	..	19
Visits on behalf of Addenbrooke's Hospital to homes of patients before or after admission			88
Visits to other cases	..	..	1390
*Fruitless visits	..	..	3188
			19508 (1970—20161)

The Health Visitors, as the general social workers of the department, give a good deal of time to problem families and deal with many problems which are far removed from the merely medical or nursing spheres. They also follow up patients discharged from regional hospitals as requested, particularly those from the geriatric unit at Chesterton Hospital. They work in attachment to general medical practitioners.

HOME NURSING

The establishment is 17 full-time nurses. The work done throughout the year is summarized as follows:

The number of cases on the books at 1/1/71	495
New cases in 1971	1497
	1992 (1970—1807)
No. of Visits paid: Medical	37517
Surgical	12692
Infectious Diseases	30
Tuberculosis	—
Maternal Complications	118
Unclassified	182
	50539 (1970—48181)

* Calls at houses where no one was at home or where, for some other reason the object of the visit could not be attained.

SECTION 2. MATERNAL AND CHILD WELFARE

MATERNITY AND MIDWIFERY

Contraception As a result of co-operation between the City Council, the County Council, Cambridge Women's Welfare Association, the Board of Governors of the United Cambridge Hospitals, and the Cambridge Advisory Centre for Young People, the following contraception services are available:

- (a) Twice weekly sessions at Auckland Road Clinic;
- (b) A weekly session at Kingsway Clinic (by appointment);
- (c) A weekly session at the outpatient department of the Maternity Hospital;
- (d) A domiciliary service for women who are unable, for domestic reasons, to attend clinics;
- (e) An advisory clinic for young people (by appointment);
- (f) Special clinics for women requiring the Intra-Uterine Device (by appointment).

Patients are referred to these services mostly by general practitioners, health visitors, and other social agencies.

Midwives The Non-Medical Supervisor of Midwives is Miss M. Livesey, S.R.N., S.C.M., H.V.Cert (Queen's Nurse), the Superintendent Nursing Officer.

Ten midwives gave notification of intention to practise in the City during the year (1 left during the year).

In addition to domiciliary and private midwives, 80 midwives notified institutional practise from the Maternity Hospital (28 of these left the district during the year), and 12 from the Evelyn Nursing Home (9 of these left during the year).

Municipal Midwifery Service There was an establishment of 12 full-time midwives at the end of the year. 262 cases were attended (1970–299). These cases accounted for 21.5 per cent of the births of Cambridge residents.

The number of visits paid to midwifery cases was 9,254. The number of ante-natal visits was 6,339.

Gas and Air Analgesia was administered by the midwives in 43 cases; Trilene in 128 cases.

Relaxation Exercise classes are Clinics conducted by the municipal midwives. 20 courses (1970—16) were held consisting of 5 classes each, and 9–11 expectant mothers were accommodated in each class. 870 attendances were made during the year. In 1970, 633 attendances were made.

Births The number of births in Cambridge notified during the year to parents who normally reside in the City is as follows:

	1970	1971
Notified from Nursing Homes	25 (2.1 %)	24 (2 %)
Notified from Maternity Hospital	886 (73.4 %)	914 (76.5 %)
Notified from patient's own home	296 (24.5 %)	257 (21.5 %)
	1207	1195

INFANT WELFARE

Premature Births The number of live premature births (*i.e.*, birth weight 5 lbs. 8 ozs. or less) in the cases of City residents during 1971 was 43, and the survivals at the end of one month were:

	Year of Birth		Survived at end of One Month	
	1971	1970	1971	1970
Born at Home ..	1	4	1	4
Born in Hospital ..	42	73	38	66
Born in Nursing Home	—	—	—	—
	43	77	39	70

Special attention is given to this group of infants by the Health Visitors.

Infant Welfare Clinics Thirteen infant welfare sessions were held weekly one fortnightly and one monthly in the City at ten centres. Toddler sessions, for children of 18 months to 5 years, who attended by appointment were held at seven centres: Romsey, Cherry Hinton, Auckland Road, East Barnwell, Chesterton, Kingsway and Norwich Street.

The usual activities of weighing babies, giving advice to the mothers, and selling foods were carried on at all the centres. Proprietary brands of dried milk were sold at cost price. Accessory food substances, *e.g.*, Marmite and Vitamin Tablets were also obtainable.

In addition, the centres functioned as depots for the distribution of National Dried Milk, Cod Liver Oil, Vitamin Capsules and Orange Juice for expectant mothers and children.

ATTENDANCES AT MATERNITY AND CHILD WELFARE CLINICS DURING THE YEAR 1971

Clinic	Day and Time Held	No. of Sessions held in the Year	New Cases		No. of Attendances				Nos. who attended in the year, and who, at the end of the year were:				Doctors' Consultations
			0-1	1-5	Born		Born		0-1	1-2	2-5		
					1971	1970	1970	1967/69					
			0-1	1-5	1971	1970	1967/69						
Auckland Road	Tuesday p.m.	48	79	1	442	262	78	57	38	41	130		
Auckland Road	Friday p.m.	6	—	—	—	3	34	—	—	—	37		
Castle Street	Tuesday a.m.	48	49	3	388	214	93	104	68	67	91		
Castle Street	Tuesday p.m.	48	70	4	384	291	211	—	—	—	264		
Cherryhinton	Monday p.m.	48	97	9	621	543	299	163	154	202	314		
Cherryhinton	Thursday p.m.	48	103	4	609	628	293	—	—	—	298		
Cherryhinton	Friday a.m.	10	—	—	—	16	87	—	—	—	100		
Chesterton	Thursday a.m.	48	49	3	233	368	171	152	154	145	40		
Chesterton	Thursday p.m.	48	124	11	868	773	287	—	—	—	666		
Chesterton	Thursday p.m.	2	—	—	—	—	22	—	—	—	22		
East Barnwell	Monday p.m.	9	—	2	—	8	65	63	64	82	73		
East Barnwell	Thursday p.m.	47	73	4	724	518	156	—	—	—	289		
Kingsway	Monday p.m.	48	171	2	1159	993	267	225	238	231	260		
Kingsway	Tuesday a.m.	48	68	8	583	794	192	—	—	—	517		
Kingsway	Tuesday p.m.	11	—	1	1	2	89	25	15	12	92		
Newnham	2nd Wednesday p.m.	12	25	2	82	84	47	—	—	—	93		
Norwich Street	in the month												
Norwich Street	Wednesday a.m.	48	56	3	279	256	79	46	29	30	125		
	Thursday a.m.	3	—	—	—	—	20	—	—	—	20		
Romsey	Monday p.m.	10	—	—	—	18	85	—	—	—	103		
Romsey	Wednesday p.m.	48	116	15	964	812	310	173	144	183	701		
Romsey	Thursday a.m.	48	63	6	470	269	154	—	—	—	174		
Trumpington	1st & 3rd Monday p.m.	24	62	4	268	208	69	46	32	23	205		
	in the Month												
		710	1205	82	8075	7060	3108	1054	936	1016	4614		
(1970)		(716)	(1233)	(150)	(7627)	(6405)	(3391)	(1033)	(904)	(1068)	(4441)		

Test Feeds During the year infant weighing machines were lent out 23 times (1970—22) to mothers, to enable them to carry out 24-hour test feeds at home.

Phenylketonuria Some children are born with a disorder of metabolism which quickly leads to irreversible brain damage so that they become severely subnormal mentally. Although the incidence of this state is only about 1 in 20,000 the introduction of a simple blood test (Guthrie Test) to reveal the condition enables suitable dietetic treatment to be instituted. This usually prevents brain damage and allows the child to grow up mentally normal. The health visitors are now taking a drop of blood from all babies for laboratory testing.

Congenital dislocation of the hip This condition, if not corrected early in life, leads to a serious abnormality in walking or necessitates the alternative of an operation and more or less lengthy period in a plaster cast. All our midwives have received instruction in early testing for congenital dislocation of the hip and they examine every child whom they deliver, at the age of three days.

NURSERIES

Sedley Day Nursery This Nursery takes 40 children and is accepted by the Department of Education and Science and the Department of Health as a Training Centre for the training in practical work of a number of students who are taking the Nursery Nurses' Course at the Technical College. As a rule four students are under training at the Nursery.

The attendances during the first quarter of the year were as follows:

		Capacity		Average Attendance		No. on Waiting List	No. of Attendances	
		F.T.	P.T.	F.T.	P.T.		F.T.	P.T.
Age 0 to 2	..	14	—	10	—	17	643	—
Age 2 to 5	..	26	3	26	2	53	1653	97

(F.T.=Full-time P.T.=Part-time)

The Nursery was transferred to the County Council on 1st April 1971.

MATERNITY AND CHILD WELFARE DENTAL SCHEME

The following table shows the treatment provided for expectant and nursing mothers and young children during the year.

	<i>Children 0-5</i>	<i>Expectant and Nursing Mothers</i>
First Visit	92	9
Subsequent Visits	167	64
Total Visits	259	73
Number of Additional Courses or Treatment other than the first course commenced during the year ..	3	1
Treatment provided during the Year:		
Number of Fillings	205	96
Teeth Filled	179	82
Teeth Extracted	116	15
General Anaesthetics given	41	2
Emergency Visits by Patients	35	6
Patients X-Rayed	3	3
Patients Treated by Scaling and/or Removal of Stains from the teeth (Prophylaxis)	25	7
Teeth otherwise Conserved	34	—
Teeth Root Filled	—	—
Inlays	—	—
Crowns	—	2
Number of Courses of Treatment Completed during the Year.. .. .	73	8
Patients Supplied with Dentures	—	1
General Anaesthetics Administered by Dental Officers	—	—
Number of Patients given First Inspections	163	17
Number of Patients who required Treatment	77	17
Number of Patients who were Offered Treatment	74	16

OTHER INFANT WELFARE SERVICES

Illegitimate Children A grant of £300 a year was paid to the Cambridge-shire Association for Social Welfare in virtue of their work among mothers of illegitimate children.

Child Life Protection The work of supervision of children 0 to 15 years old, boarded out for gain, is now the responsibility of the County Director of Social Services although the City Health Visitors have a general interest in these as in the case of other children under five.

Speech Therapy 5 Children were referred for speech therapy in 1971 (1970—4).

Handicapped Children Under 5 Children born with a defect are notified by the Maternity Hospital or the domiciliary midwife. Such children are recorded in our 'At Risk' register and every effort is made to have the defect remedied or appropriate supervision and suitable treatment provided. At the end of 1971 our register contained the names of 31 mentally handicapped children and 82 physically handicapped.

SECTION 3. THE SCHOOL HEALTH SERVICE

GENERAL STATISTICS FOR 1971

Number of Schools:

Primary	..	..	..	..	..	..	25
Secondary Grammar	..	..	..	..	..	..	4
Secondary Modern	..	..	..	..	..	..	5
Special	..	..	..	..	..	..	2
Nursery	..	..	..	..	..	..	4

Number of Departments:

Nursery	..	..	..	..	..	..	4
Primary	..	..	..	..	..	..	42
Secondary Grammar	..	..	..	..	..	..	4
Secondary Modern	..	..	..	..	..	..	8
Special	..	..	..	..	..	..	2

Number of children on registers at the beginning of the year

1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
13131	13402	13699	13877	13990	13998	14138	15322	15451	15620

Average number of children in attendance

1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
12044	12222	12302	12471	12871	12229	13331	13571	14269	14228

SCHOOL MEDICAL INSPECTION

The usual arrangements for routine medical inspections in this country provide for an examination shortly after a child enters school, another at the age of ten and a final one as a ‘leaver’. In Cambridge children are examined as follows:

1. At nursery school (every term)
2. At primary school as entrants (in the 6th year)
3. At primary school in the 9th year (eyes only)
4. At secondary school in the 12th year
5. At secondary school as leavers (in the 15th year)

A full examination in the 9th year was adopted experimentally some years ago. It did not prove justifiable and so we reverted to an examination of the eyes only at this age.

Periodic Medical Inspection of Pupils attending Maintained and Assisted
Primary and Secondary Schools (including Nursery and Special Schools)

Age Groups inspected (By year of Birth)	No. of Pupils who have received a full medical examin- ation	Physical condition of pupils inspected		No. of Pupils found not to warrant a medical examination (See Note 1 above)	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory		for defective vision (excluding squint)	for any other condition recorded at Part II	Total individual pupils
		No.	No.		(6)	(7)	(8)
(1)	(2)	(3)	(4)	(5)			
1967 and later	345	345	—	—	—	13	11
1966	766	766	—	—	22	97	101
1965	565	565	—	—	17	50	62
1964	20	20	—	—	—	—	—
1963	—	—	—	—	—	—	—
1962	—	—	—	—	—	—	—
1961	1070	1070	—	—	47	133	167
1960	103	103	—	—	6	8	13
1959	33	33	—	—	1	6	6
1958	102	102	—	—	—	6	6
1957	949	949	—	—	66	61	114
1956 and earlier	47	47	—	—	2	2	3
Total	4000	4000	—	—	161	376	483

Col. (3) total as a per-centage of Col. (2) total 100

Col. (4) total as a per-centage of Col. (2) total nil

to two places of decimals

Other Inspections

Number of Special Inspections	..	..	..	..	716
Number of Re-inspections	..		..	..	1357
				Total	2073

Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	15116
(b) Total number of individual pupils found to be infested	67
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	20
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—

Defects found by Periodic and Special Medical Inspection during the Year

Defect Code No. (1)	Defect or Disease (2)						Periodic Inspections				Special Insp'ns (7)	
							Entrants (3)	Leavers (4)	Others (5)	Total (6)		
4	Skin	..	..	..	..	..	T O	5 32	8 11	19 11	32 54	1 12
5	Eyes:	(a)	Vision	..	..	..	T O	39 136	68 107	54 65	161 308	140 78
		(b)	Squint	..	..	..	T O	22 36	1 7	3 10	26 53	6 18
		(c)	Other	..	..	..	T O	1 3	— 9	1 3	2 15	— 9
6	Ears	(a)	Hearing..	..	..	..	T O	54 64	5 3	20 11	79 78	54 8
		(b)	Otitis Media				T O	1 34	— —	— 5	1 39	— 3
		(c)	Other	..	..	..	T O	1 74	1 5	2 20	4 99	— 27
7	Nose and Throat	..	..	..	..	..	T O	12 127	— 26	— 46	12 199	— 41
8	Speech	..	..	..	..	..	T O	29 29	1 —	3 8	33 37	33 10
9	Lymphatic Glands	..	..	..	..	..	T O	— 105	— 9	— 37	— 151	— 38
10	Heart	..	..	..	..	..	T O	4 15	— 1	— 1	4 17	— 7
11	Lungs	..	..	..	..	..	T O	2 42	— 4	4 15	6 61	4 18
12	Developmental	(a)	Hernia	..	..	..	T O	3 2	— —	1 1	4 3	— 2
		(b)	Other	..	..	..	T O	— 8	1 4	— 4	1 16	— —
13	Orthopaedic	(a)	Posture	..	..	..	T O	3 —	15 —	8 —	26 —	25 —
		(b)	Feet	..	..	..	T O	21 117	36 16	75 21	132 154	102 21
		(c)	Other	..	..	..	T O	1 13	1 6	2 9	4 28	5 6
14	Nervous System	(a)	Epilepsy	..	..	..	T O	1 4	— 1	— —	1 5	— 3
		(b)	Other	..	..	..	T O	— 4	— 1	— —	— 5	— 2
15	Psychological	(a)	Development	..	..	..	T O	— 16	— 2	1 13	1 31	2 6
		(b)	Stability	..	..	..	T O	— 98	— 10	1 47	1 155	— 38
16	Abdomen	..	..	..	..	..	T O	— 15	— 2	— 8	— 25	— 10
17	Other	..	..	..	..	..	T O	— 17	— 15	7 10	7 42	1 9

T = Treatment O = Observation

SUPERVISION AND TREATMENT

School Clinics

There are two sessions each week at Romsey and Auckland Road Clinics and one each at Cherry Hinton Hall and Kingsway. Attendances at the clinics were as follows:

Auckland Road	..	..	..	110
Romsey	..	..	..	340
Cherryhinton Hall	..	..	..	27
Kingsway	..	..	..	50

Treatment Tables

Eye Diseases, Defective Vision and Squint

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint	—
Errors of refraction (including squint)	1148
Total	1148
Number of pupils for whom spectacles were prescribed	501

Diseases and Defects of the Ear, Nose and Throat

	<i>Number of cases known to have been dealt with</i>
Received operative treatment:	
(a) for diseases of the ear	20
(b) for adenoids and chronic tonsillitis	62
(c) for other nose and throat conditions	—
Received other forms of treatment ..	—
Total	82
Total number of pupils in schools who are known to have been provided with hearing aids:	
(a) in 1971	3
(b) in previous years	27

Orthopaedic and Postural Defects

	<i>Number of cases known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments ..	—
(b) Pupils treated at school for postural defects	314
Total	<u>314</u>

Diseases of the skin

(excluding uncleanliness, for which see Table on page 73)

	<i>Number of cases known to have been treated</i>
Ring-worm—(i) Scalp	—
(ii) Body	—
Scabies	—
Impetigo	—
Other skin diseases	—
Total	<u>nil</u>

Child Guidance Treatment

	<i>Number of cases known to have been treated</i>
Number of pupils treated at Child Guidance Clinics	252

Speech Therapy

	<i>Number of cases known to have been treated</i>
Number of pupils treated by Speech Therapists.. .. .	275

Other Treatment Given

	<i>Number of cases known to have been treated</i>
(a) Pupils with minor ailments ..	183
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	1219
(d) Other than (a), (b) and (c) above (specify)	—
(e) In-patients Addenbrooke's ..	166
Total (a)–(e) ..	1568

Mentally Subnormal Children

No. of children reported to the Local Health Authority during 1971:
Under Section 57 (4) of the Education Act —

WORK OF THE SCHOOL NURSES

There is an establishment for 19 School Nurses, but 18 give only a part of their time to school work. The nineteenth nurse works full time at the Roger Ascham School.

The nurses' work is shown in the following table:

<i>Attendances at schools</i>						
Routine medical inspections	..	..	..	..	..	364
Personal hygiene inspections	..	..	..	..	..	117
Other school visits	..	..	..	..	..	396
B.C.G. Sessions	..	..	..	..	..	36
<i>Attendances at clinics</i>	..	..	..	..	..	241
<i>Home Visits</i>	..	..	..	..	..	360
<i>Eye Clinics</i>	..	..	..	..	..	28

SPECIAL PROVISIONS

The Roger Ascham School This is a special school of 120 places catering for children who, for physical or other reasons, do not fit into the ordinary school system. It is situated in Ascham Road off Milton Road. The classrooms are all separate blocks spaced out in a pleasant garden and open grounds. Children from 5 to 16 years are admitted for periods varying with their needs; but the policy is, wherever possible, to give intensive treatment so that they may return to an ordinary school as soon as possible. Separate cloakroom and toilet facilities are provided for each classroom.

All children stay for lunch. Lessons are taken out of doors whenever possible, and emphasis is laid on other outdoor activities like games, dancing and swimming.

A medical officer attends for two sessions each week. A nurse is in attendance each morning. There are two full time physiotherapists and one half time physiotherapist who treat the children as required. The orthopaedic specialist and the paediatrician of Addenbrooke's Hospital visit the school.

Special transport is provided. There is no serious waiting list.

Cerebral Palsy Unit A special unit for the treatment and education of children suffering from cerebral palsy forms part of the Roger Ascham School. The physiotherapists treat the children for whom there are two special classes: one for children under seven and the other for children above that age. Paediatric and orthopaedic consultants visit the unit regularly. About 50 children are usually under treatment at any one time, some being in the general classes of the school.

A detailed written record is kept of each child's command of posture and bodily movements and the changes which take place during treatment. In addition, cinematograph films are taken at intervals and these form a valuable record from which results may be assessed.

Diagnostic Unit This unit, also at the Roger Ascham School, is for diagnosing the needs of any child who seems likely to require special educational treatment. It functions with a maximum of 10 children. These are children who appear to be somewhat mentally retarded and are admitted to the diagnostic unit at just under 5 years old with a view to determining whether they are going to prove suitable for ordinary school, Educationally Sub-Normal School or Training Centre.

They stay for a minimum of 6 months and a maximum of 2 years. The unit is in the charge, under the Headmistress, of a teacher with considerable experience in the work of a diagnostic unit.

All children are seen with their parents before admission by a panel consisting of the School Medical Officer, the Educational Psychologist, the Headmistress and the teacher of the unit; and each child is reviewed every six months by the same panel in the presence of the parents.

The Lady Adrian School This school, situated in Courtney Way is for educationally sub-normal children. It has accommodation for 130. 50 places are reserved for children from the County area outside the City.

The age range is from 7 to 16, and intelligence quotients range from

about 48 % to about 80 % of the average. This quotient is, of course, only a guide to admission, and other factors are taken into consideration when the assessment is made. These children, who would inevitably lose their confidence by working with children of superior ability in big classes, are helped to develop to the best of their potentiality by working to their own pace in small groups where friendly relations are easier to establish. Almost all the children are subsequently able to take their place in the community, and suitable employment is found for them before they leave the school.

Drama, painting, dancing, handicraft and cooking as means of self-expression play an important part in the life of the school and help to develop the children's ability to enjoy comradeship and group spirit. Visits in the city and further afield stimulate their interest and broaden their outlook.

The greatest benefit is derived if children can be admitted before secondary school age.

Special transport is provided and a doctor, nurse and physiotherapist attend the school.

Physiotherapy The work of the Peripatetic Physiotherapists is set out below.

School departments visited	..	..	44
Children treated:			
Asthma	..	..	135
Foot defects	..	..	790
Postural defects	..	..	310
Breathing exercises	..	..	52
Cerebral Palsy	..	..	22
Poliomyelitis	..	..	—
			1353

At the Roger Ascham School 55 children were treated.

Spina Bifida	..	..	8
Spastics	..	..	21
Breathing exercises	..	..	9
General Physiotherapy	..	..	11
Postural Drainage	..	..	—
Out-patient Spastics	..	..	4

Speech Therapy We share 6 Speech Therapists with the School Health Service of the County Council, but for most of the year we did not have a full complement. Treatment is given at Kingsway, Cherry Hinton Hall, Romsey and Auckland Road clinics, at the Roger Ascham School and at

some of the larger schools on the outskirts of the city. The following table shows the work done during the year.

Number of new referrals examined and put on list for speech therapy: 122.

Number of children treated throughout 1971: 275.

Number given regular treatment during some period of the year: 179.

Number seen occasionally for treatment or advice: 96.

Number discharged from treatment during year: 8

speech normal	24
speech satisfactory	40
left area, etc.	24

Number on treatment list at end of 1971: 237.

Number on waiting list at end of 1971: 66.

Number referred but not yet examined at end of 1971: 3

Total number on books at end of year: 306.

Types of disorder treated

1	Cleft palate	..	..	..	..	..	..	1
2	Sigmatism	..	..	..	..	..	..	22
3	Partial deafness	..	..	..	..	..	..	2
4	Cerebral palsy	..	..	..	..	..	..	9
5	Other disorders of articulation and language	..	..	..	..	..	..	199
6	Stammer	..	..	..	..	..	..	36
7	Voice disorders	..	..	..	..	..	..	4
8	Others	..	..	..	..	..	..	2

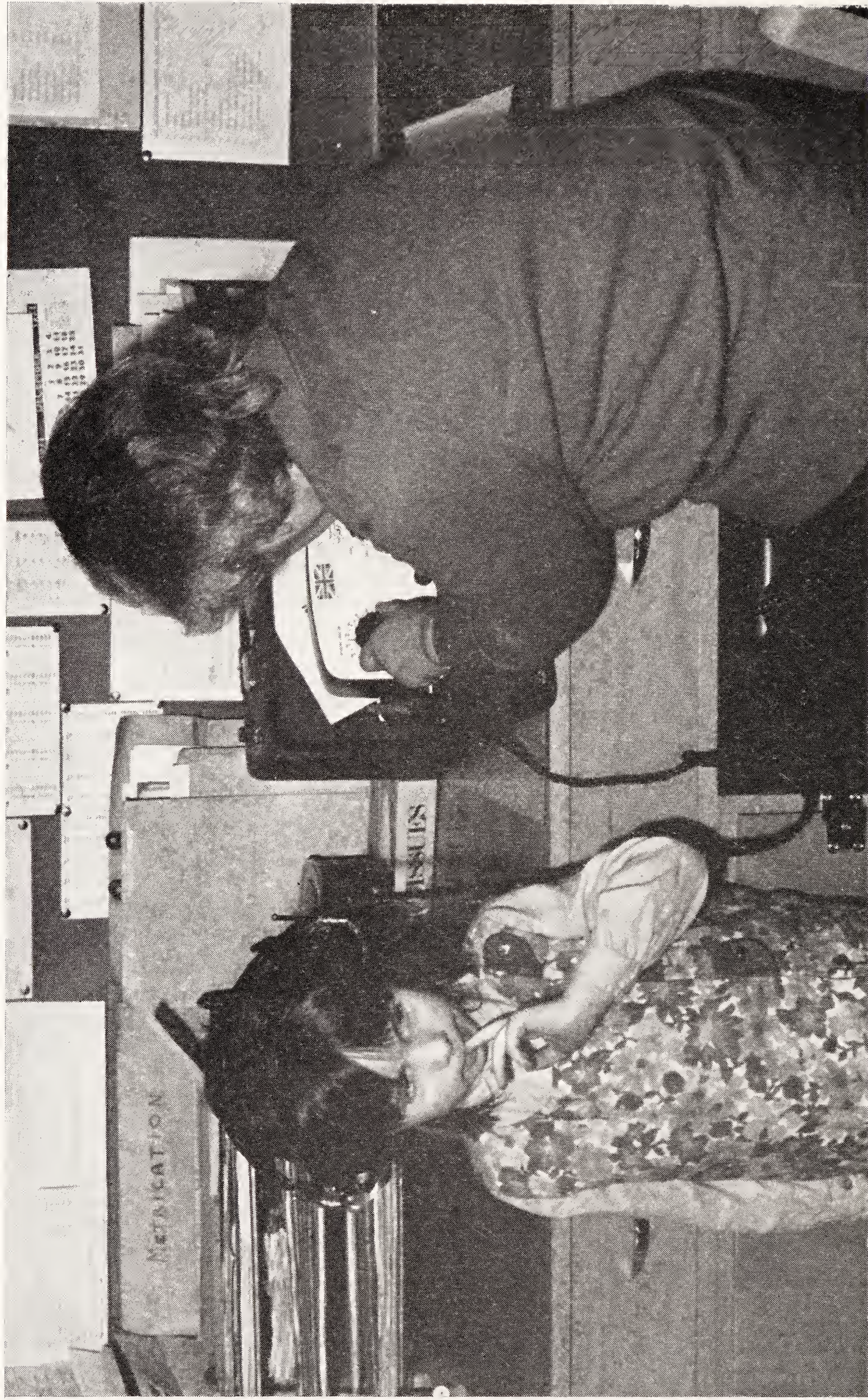
								Total 275

Audiometry An audiometrician visits the schools and sweep-tests all of the six- and seven-year-old children and all children specially referred as possibly having impaired hearing. Those who fail are retested after a month. Failures of the second tests are referred, for further examination and treatment, to General Practitioners in cases of minor degrees of deafness, or to the Ear, Nose and Throat Specialist at the Hospital where gross hearing loss is present.

The numbers tested were:

Six and seven-year-olds	..	..	..	1132
Special	..	..	..	242
The number of re-tests were	..	..	..	556
The number who failed re-tests	..	..	..	216
The number referred to hospital	..	..	..	51

Audiology A special clinic is held once a fortnight at Cherry Hinton Hall. A consultant audiologist attends and there were 103 attendances during the year at this clinic which includes both City and County children.



Testing hearing by Pure-Tone Audiometer

Partially Hearing Children Children with impaired hearing receive special attention in a group at Homerton Nursery School and there are special classes at other schools. The class at Sedley School is for children in the nursery and infant range. The classes at Mayfield and Coleridge Schools are for older children.

Handicapped Pupils In addition to the special provisions so far described we have access to the Child Psychiatric Service of the Regional Hospital Board and to the services of various departments of the United Cambridge Hospitals. If we cannot provide suitable facilities for a handicapped child locally we endeavour to place him in a suitable residential school. The following table shows the number of children so placed.

<i>Category</i>	<i>Number on Registers of Residential Special Schools at end of year</i>		
Blind/Partially Sighted	..	..	6
Deaf/Partially Hearing	..	..	7
Physically Handicapped	..	..	1
Educationally sub-normal	..	..	7
Maladjusted ..	..	..	4

SCHOOL DENTAL SERVICE

Attendances and Treatment

First visits	..	..	..	..	..	..	..	2612
Subsequent visits	..	..	..	..	..	..	..	7839
Total visits	..	..	..	..	..	..	..	10451
Additional courses of treatment	..	..	..	..	..	..	..	281
Fillings in permanent teeth	..	..	..	..	..	..	..	5819
Fillings in deciduous teeth	..	..	..	..	..	..	..	3313
Permanent teeth filled	..	..	..	..	..	..	..	4348
Deciduous teeth filled	..	..	..	..	..	..	..	2761
Permanent teeth extracted	..	..	..	..	..	..	..	717
Deciduous teeth extracted	..	..	..	..	..	..	..	2671
General anaesthetics	..	..	..	..	..	..	..	727
Emergencies	..	..	..	..	..	..	..	903
No. of pupils X-rayed	..	..	..	..	..	..	..	385
Prophylaxis	..	..	..	..	..	..	..	595
Teeth otherwise conserved	..	..	..	..	..	..	..	38
No. of teeth root filled	..	..	..	..	..	..	..	23
Inlays	..	..	..	..	..	..	..	1
Crowns	..	..	..	..	..	..	..	15
Courses of treatment completed	..	..	..	..	..	..	..	1989

Orthodontics

New cases commenced	..	..	..	..	..	..	..	78
Cases completed	..	..	..	..	..	..	..	88
Cases discontinued	..	..	..	..	..	..	..	4
No. of removable appliances fitted	..	..	..	..	..	..	..	171
No. of fixed appliances	..	..	..	..	..	..	..	—
Pupils ref. to hospital consultant	..	..	..	..	..	..	..	—

<i>Dentures supplied</i>	..	..	..	..	..	..	..	15
--------------------------	----	----	----	----	----	----	----	----

<i>Inspections</i> at school 1st	..	..	..	..	..	..	..	1293
Inspections at clinic 1st	..	..	..	..	..	..	..	2352
No. requiring treatment	..	..	..	..	..	..	..	2471
No. offered treatment	..	..	..	..	..	..	..	2457
Pupils re-inspected	..	..	..	..	..	..	..	459
No. requiring treatment	..	..	..	..	..	..	..	235

2170 sessions devoted to treatment
8 sessions devoted to inspections
48 sessions devoted to dental health

SCHOOL MEALS AND MILK

During 1971, 1,762,020 school meals were served: 155,125 to staff and 1,418,146 to children. 189,436 of the children's meals were free.

Milk was supplied in $\frac{1}{3}$ pint bottles. 1,215,870 bottles went to maintained schools and 103,037 to non-maintained schools.

During the year the law relating to the provision of milk in schools was altered and, in the autumn term, free milk was supplied to children in any of the following categories:

- 1 all pupils in special schools.
- 2 all children in nursery and infant schools (up to the end of the summer term next after their seventh birthday).
- 3 children in primary schools and juniors in all-age and middle schools if their need was certified by a school medical officer.

MISCELLANEOUS

Examination of Teachers During the year 220 candidates were examined prior to entering colleges for training as teachers.

Juvenile Employment 362 children were examined, during the year, to determine their fitness for employment.

Educational Psychologists The Authority's Educational Psychologists work in the City and County. They advise teachers upon problems of educational retardation and emotional disturbances, and also carry out assessments of intelligence and remedial teaching in reading.

SECTION 4. OTHER WELFARE SERVICES

WELFARE OF OLD PEOPLE

General The Health Visitors include care of the elderly in their normal duties and we maintain liaison with voluntary bodies such as The Cambridgeshire and Isle of Ely Old People's Welfare Council, to which the City Council makes an annual grant. Regular meetings are held of those principally concerned with the welfare of old people in the City and the County, and Meals on Wheels are provided by the W.V.S.

Persons in need of care and attention Section 47 of the National Assistance Act, 1948, provides for legal action to be taken by the Council in certain circumstances where it appears that persons in need of care and attention should be removed to more suitable premises. Two cases arose in 1971.

Incontinence Pads Incontinence pads are supplied to all persons in need, the number being approximately 1000 a month. Hospital type plastic bags for soiled pads are supplied by the department, and with the contents are either burned by the householders or taken by them to the Public Incinerator. When this involves hardship the district nurses themselves may collect and dispose of the bags in the Incinerator.

Seymour House Geriatric Day Centre This is located on the south-east side of the city, on part of a site which belongs to the local authority. The remainder of the site is occupied by old people's bungalows and flatlets. The flatlets are under the supervision of a warden, and are connected to Seymour House by covered walks. On an adjacent site Cambridgeshire County Council has built an old people's residential home for those who need constant care and attention.

The main purpose of Seymour House is to provide facilities for elderly people, particularly those with some physical disability who would otherwise be housebound and have few social contacts. It caters for people in the City and County. Each person attends for one or two days per week. Transport is provided: this consists of an ambulance/bus which has a tail-lift for those who have difficulty in climbing steps. The Centre is open from 9 a.m. until 5 p.m. Mondays to Fridays. Morning coffee, a cooked lunch and afternoon tea are provided for 12½p a day.

Instead of being confined to their houses, those who attend are able to meet and talk with others, and this alone appears to bring about a marked improvement in their outlook and general condition. They play cards, watch television and indulge in other activities. Film shows are sometimes given. There are facilities for baths, showers and hair-washing. On some days there are sessions of occupational therapy and chiropody. It is hoped that physiotherapy will be available later, and also cookery training for elderly men who live alone.

People are recommended for attendance by general practitioners, hospital consultants, health visitors, district nurses and others. Seymour House can cater for up to 52 old people daily, and up to 20 of the inhabitants of the adjacent flatlets attend for lunch only.

The main room is a large hall which can be divided, and part of it is used in the evenings as a club-room for old people living in the flatlets and bungalows nearby. The staff consists of 3 attendants, 1 driver, 1 cook and 1 domestic helper in addition to the Superintendent and deputy (both of whom are State Registered Nurses), and an Occupational Therapist.

The Centre was transferred to the County Council on April 1st, 1971.

MENTAL HEALTH

The Mental Health Service was transferred to the County Council on April 1st 1971. Only the first quarter of the year was the concern of the Public Health Department, and it was not possible to separate the figures for City and County.

THE BLIND AND PARTIALLY SIGHTED

The following tables show the work done by the Welfare Officers during the first quarter of the year. (The service was transferred to the County Council on 1st April 1971).

	<i>Male</i>	<i>Female</i>	<i>Total</i>
No. on register at beginning of year ..	96	139	235
Additions to register	6	—	6
Removals from register	2	8	10
No. on register at quarter end	100	131	231
No. of personal visits	115	119	234
No. of lessons given	29	52	81

The lessons given were:

Raffia ..	5	Lampshade making	2	Knitting ..	2
Stoolmaking	11	Chair caning ..	13	Miscellaneous	18
Pulpcane ..	30				

In addition to the personal visits recorded in the tables, the Welfare Officers made 107 miscellaneous visits and gave instruction at 7 sessions of the Tuesday Craft Class.

Liaison is maintained with the Cambridgeshire Society for the Blind (who run two residential homes and a club in the City) and the Welfare Officers have given some assistance to a group of blind people who have formed a rehabilitation club.

OTHER PHYSICALLY HANDICAPPED

The Welfare Officers also visited persons with physical handicaps other than deficiency of sight, hearing or speech and the following tables show the work done in the first quarter of the year. (The service was transferred to the County Council on 1st April 1971).

	<i>Male</i>	<i>Female</i>	<i>Total</i>
No. on register at beginning of year ..	157	286	445
Additions to register	7	13	20
Removals from register	7	10	17
No. on register at quarter end	157	289	446
No. of personal visits	167	286	453
No. of lessons given	27	19	46

The lessons given were:

Pulpcane ..	24	Lampshades ..	3	Miscellaneous	16
Rugmaking ..	1	Raffia	2		

CERVICAL CYTOLOGY CLINICS

Monthly clinics were held on the 1st Friday afternoons in the month at Auckland Road Clinic and the 3rd Friday afternoons in the month at Romsey Clinic.

119 patients attended Auckland Road Clinic in 11 sessions.

155 patients attended Romsey Clinic in 14 sessions.

CHIROPODY SERVICE

An arrangement has been made with local Chiropodists in private practice whereby persons in the categories listed below who are recommended by their doctor or by the Public Health Department, may receive treatment at reduced rates. The work carried out is summarised in the following table.

Number of persons treated during 1971

	<i>By Local Authority (1)</i>	<i>By Voluntary Organisations (2)</i>	<i>TOTAL (3)</i>
Male over 65	411	—	411
Female over 60	2,153	—	2,153
Expectant mothers	1	—	1
Physically handicapped or otherwise disabled persons under age 65	184	—	184
TOTAL	2,749	—	2,749

Number of treatments given during 1971

	<i>By Local Authority (1)</i>	<i>By Voluntary Organisations (2)</i>	<i>TOTAL (3)</i>
In clinics { including Old Peoples Social Centres and Clubs	783	—	783
In patients homes	3,157	—	3,157
In Old Peoples Homes	742	—	742
In Chiropodists surgeries	10,717	—	10,717
TOTAL	15,399	—	15,399

Number of treatments included above which were paid for by the Authority on the basis of <i>fees per treatment.</i>	Local Authority	13,874
	Voluntary Organisations	—
	TOTAL	13,874

Part V

MISCELLANEOUS MATTERS

Health Education Posters were displayed and leaflets distributed, upon health topics, during the year, chiefly at our clinics. This publicity has included advice about smoking, venereal disease and cervical cytology. Lectures were given by members of the department to various groups and organisations in the city. Demonstrations of infant feeding methods were given at the clinics. Mothercraft classes for school girls were continued.

Visitors to the Department As usual a number of people visited the department to see our work or to receive instruction.

Ambulance Service An Ambulance Service is provided by Cambridgeshire and Isle of Ely County Council and the vehicles are stationed at depots in Ditton Walk, Cambridge, Ely, Wisbech and March. There are 21 Ambulances, 4 Utilicons and 2 chair carrying vehicles.

Research Work We continued to take part in the National Survey of Health and Development (organised by the Medical Research Council), the Survey of Childhood Cancers (organised by the Department of Social Medicine of Oxford University), and the British Births Survey.

Training Schemes We afford facilities and give instruction in the annual course for district nurses. This is run in conjunction with the health departments of the Counties of Cambridge and Isle of Ely and Huntingdon and Peterborough.

A series of lectures is given, annually, to pupil midwives at Mill Road Maternity Hospital and they come, in groups of five, for three-months periods of practical work with our midwives. Twenty pupils receive training every year.

Student nurses from Addenbrooke's Hospital each spend two weeks in the Department studying the work of the health visitors, district nurses and domiciliary midwives.

We have a scheme of sponsoring the training of nurses who wish to qualify as health visitors. There are five of these students at the present time. In addition to this, other health visitor students (mostly from Stevenage College of Further Education) come to us for short periods of practical work.

Physiotherapy students from Addenbrooke's Hospital receive instruction in the Cerebral Palsy Unit at the Roger Ascham School.

We have an approved establishment of pupil public health inspectors and there are, usually, three in training at any one time.

